



SANTA CLARA COUNTY
Behavioral Health Services

ADDICTION MEDICINE
JUNE 2016

Medication Assisted Treatment (MAT) why treat addiction with Medicine?

Addiction Medicine & Therapy Program (AMT)

“All treatments work for some people - No one treatment works for all people”

Alan I. Leshner, Ph.D
Former Director NIDA

Advances in science have revolutionized our fundamental views of drug abuse and addiction and allowed for the development of improved treatments.

NIDA. 2009.

Medications can be an important element of treatment for many patients, especially when combined with counseling and other behavioral therapies.

NIDA – Principles of Drug Addiction Treatment:
A Research Based Guide. 2nd Ed. 2009.

30 years of independent research shows that

The success of medication-assisted treatment in reducing crime, death, disease and continued compulsive illicit drug use is well documented.

I.



SUTS Addiction Medicine Division

Clinics and Programs:

Central Valley Clinic (on the VMC campus)

South County Clinic (San Martin)

Alexian Health Clinic (eastside San Jose)

Perinatal Substance Abuse Program (on VMC campus)

The Addiction Medicine & Therapy
Program is fully accredited by the

Commission on the Accreditation of
Rehabilitation Facilities (CARF)

Addiction Medicine

- AMT offers the following Medication Assisted Treatment for opioid Addiction:
- Methadone
- Suboxone
- Vivitrol
- Chantix
- Naloxone

Methadone for NTP is regulated by state and Feds:

The State requires that:

- Patients be at least 18 years of age
- Confirmed history of at least 2 years of addiction to opiates (i.e. arrest records, treatment failures, etc.) –
Does not apply to pregnant addicts
- Confirmed history of 2 or more unsuccessful attempts in withdrawal treatment (detox) with subsequent relapse to opiate use. **Does not apply to pregnant addicts.**
- Evidence of observed signs of physical dependence

Why use Methadone?

- The addicted patient benefits
 - addicts are able to quit using heroin and remain abstinent
 - a therapeutic dose enhances patients' ability to pursue education or employment
 - a therapeutic dose enhances patients' ability to regain/maintain family relationships

Why Use Methadone? (cont)

- Society benefits
 - decreased transmission of HIV and hepatitis C
 - decreased criminal activity
 - improved pregnancy outcome for opiate addicted patients
 - financial savings

Treatment Outcome Data

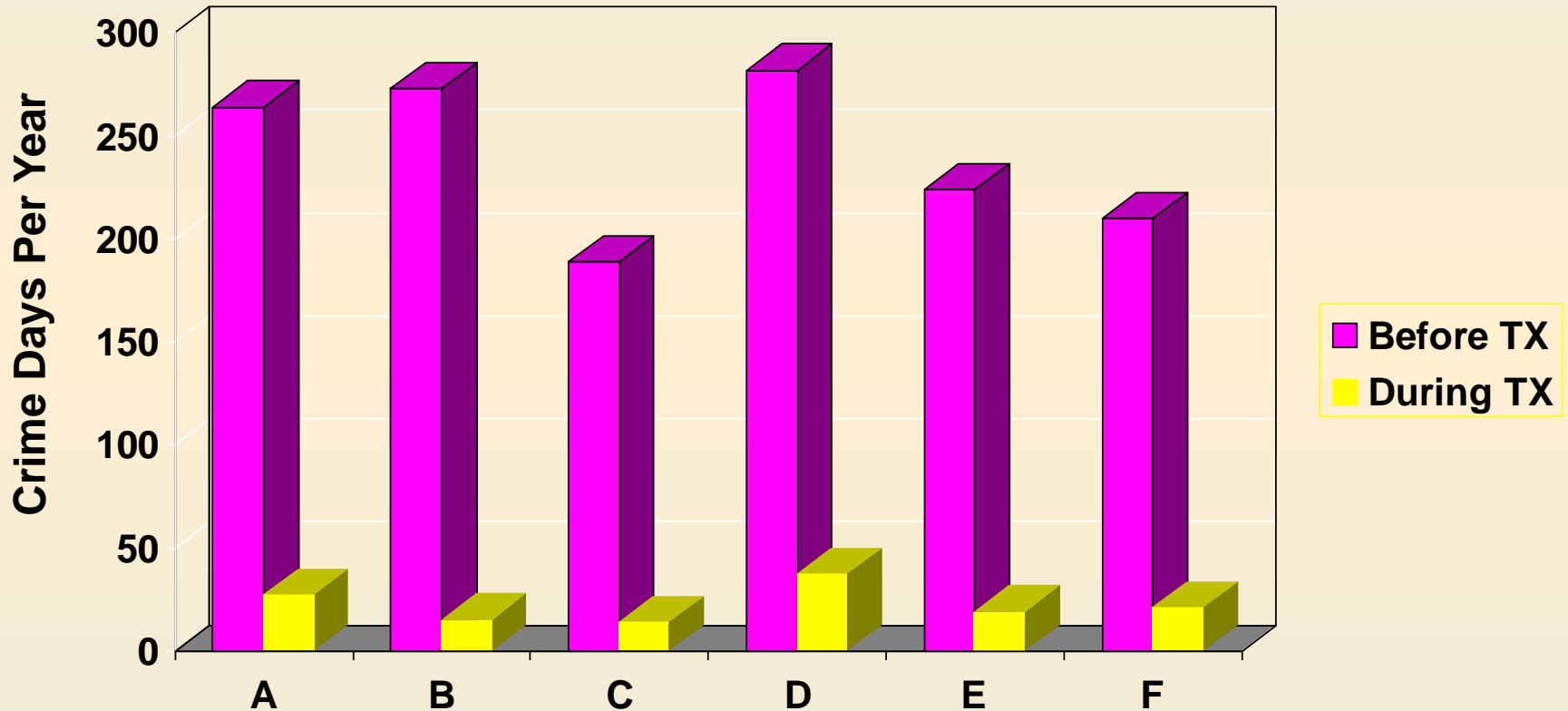
- Reduction in death rate
- Reduction/elimination of illicit drug use
- Reduction/elimination of criminal activity
- Engagement in socially productive roles
- Reduced spread of HIV
- Excellent retention

Joseph et al, 2000, Mt. Sinai J.Med., vol67, # 5, 6

AMT Data Outcome

- 99% Satisfaction Rate.....
 - Source: patient Surveys 2015
- 50% - No illicit use after 9 months.....
- National average 36%

Crime among 491 patients before and during MMT at 6 programs



Adapted from Ball & Ross - The Effectiveness of Methadone Maintenance Treatment,

Evidence for Counseling Services in Methadone Maintenance

Outcome	Methadone	Methadone + Std. Counseling	Methadone + Enhanced Counseling
Retention	31%	59%	81%
>16 consecutive weeks of (-) urines	0%	28%	55%

McLellan, A.T., Arndt, I., Metzger, D.S. Woody, G.E. & O'Brien, C.P. (1993, 2014).
The effects of psychosocial services in substance abuse treatment. *Journal of the American Medical Association*, 269 (15), 1953-1959.

A FEW WORDS ABOUT BUPRENORPHINE/Vivitrol

- Suboxone: A partial agonist/antagonist drug
- Sublingual tablet
- Vivitrol: A Monthly Injection- opioid or Alcohol
- “Office – based use available

The AMT Intake Process

Same Day Admission

By appointment

AMT – Integration with HHS

Medical Homes

Integration with Inpatient

Collaborative with ER

A Growing Problem

- Every day 2000 teens try to get high on prescription drugs (partnership for drug-free kids)
- 60% of teens who have used prescription painkillers did so before age 15 (partnership for drug-free kids)
- 49% of college students use illicit drugs, binge drink or misuse prescription drugs (Columbia university-Center for addiction)
- 17% of California teens admitted to misusing or abusing controlled medicines at least once (SAMHSA)





Supported by :

County of Santa Clara Behavioral Health

Department

The California Healthcare Foundation

Scope of opioid problem in Santa Clara County

• Deaths related to opioid OD in Santa Clara County:

• 2013: 56	75%
accidental	
• 2014: 46	25% suicide
or undetermined	
• 2015: 60	

(Santa Clara County coroner's office)

• Santa Clara County Hospital visits 2014:

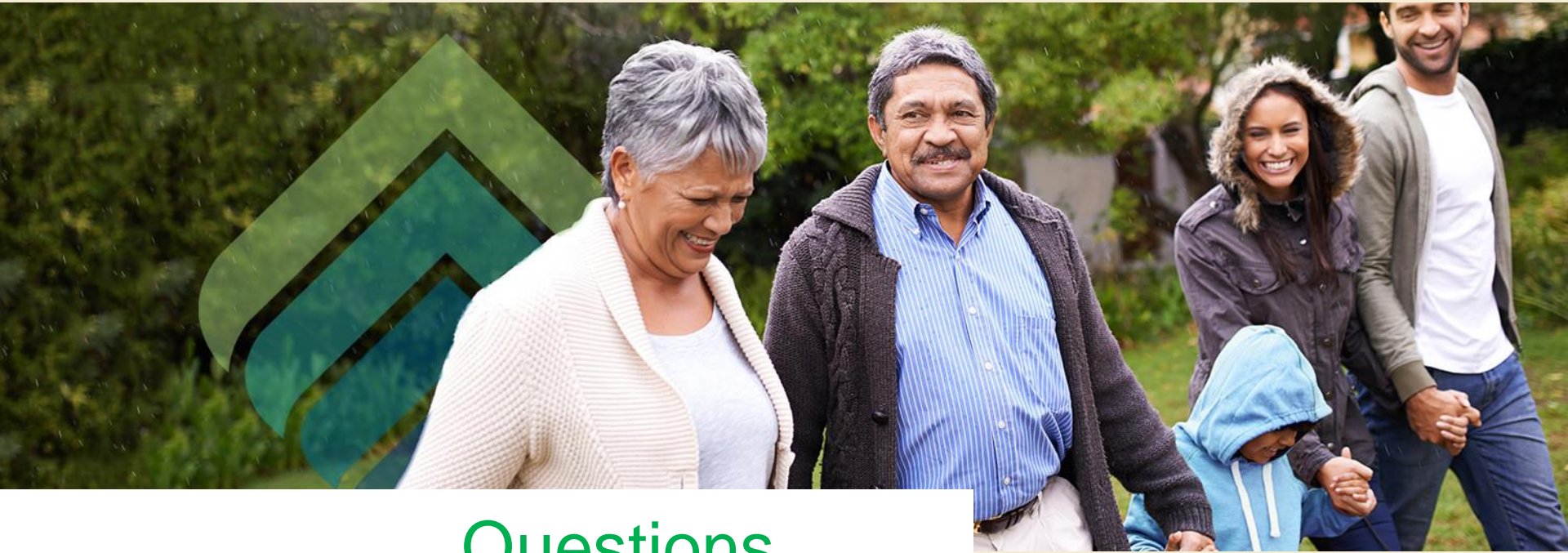
7,153 non-fatal alcohol or drug poisoning ED visits and 1,542 admissions (>12 years old)

<http://epicenter.cdph.ca.gov>

- 17% of California teens admitted to misusing or abusing controlled medicines at least once *(SAMHSA)*
- 28% of teens believe prescription drugs are safer than street drugs

Initiatives/Goals

- To develop Prescribing guidelines for Opioids and get it adopted by community physicians and Emergency rooms in Santa Clara County.
- Educate Physicians on prescribing Opioids and alternatives
- Increase access to treatment
- Provide Naloxone Kits to community members and patients who are at risk of overdose
- Develop Community outreach Task units for Opioid Take backs events
- To launch county wide campaign on Prescription Abuse and educate Youth through schools and PTA's



Questions