Prescription Drug Abuse: Regulatory Considerations

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Examining Prescription Drug Abuse
Conference Call
February 22, 2012

Prescription Opioid Abuse

• Now the second most prevalent category of illicit drugs used by youths, young adults
  – Pill parties
• 70 percent obtain from family, friends (who obtain from a single prescriber)
  – Prescribed more than needed
  – Unaware of proper storage, disposal practices
  – Manipulated, fooled by dependent patients

Source: SAMHSA, 2010 National Survey on Drug Use and Health (September 2011)
Prescription Opioid Abuse

- **Source:** SDI: Vector One® National, Total number of prescriptions dispensed in the U.S. by top 10 prescribing specialties for immediate-release opioids, Year 2009, Extracted June 2010.

National Rx Abuse Prevention Plan

- Multi-agency effort
- **Office of National Drug Control Policy (ONDCP)**
- Focus areas:
  - Education/training
  - Rx Monitoring
  - Medication disposal
  - Enforcement

**Epidemic:** Responding to America’s prescription drug abuse crisis

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Provider Education, Training

- **DEA registration (CE as pre-condition)**
  - Unprecedented
  - Coordination with states?
  - Requires new legal authority
  - Several bills in play

- FDA Opioid Risk Evaluation and Mitigation Strategy (REMS)
  - Proper pain management, prescribing practices
  - Suggested CE module for voluntary use

Provider Education, Training (cont’d)

- Clinical guidelines
  - Recommendations only
  - Likely via CDC, FDA

- Dental school curricula
  - Tied to dental school grants
  - Likely via NIH

- Financial incentives (CE-based)
  - Medicaid, other grant/entitlement programs
  - Likely via CMS, HRSA
Bottom Line

- ADA must demonstrate that the profession has improved (or is at least more mindful of) its prescribing practices.
- Failure could result in mandates.
- Feds are willing to work with us to develop CE courses, professional guidelines.
- We must demonstrate that dentists are using these resources.

Questions?

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Prescribers’ Clinical Support System for Opioid Therapies (PCSS-O)

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Initiative funded by the Substance Abuse and Mental Health Services Administration (SAMHSA).

A collaborative project with health professional organizations that provides training and education on the safe and effective prescribing of opioid medications in the treatment of pain and/or opioid addiction.
Prescribers’ Clinical Support System for Opioid Therapies (PCSS-O) Goals

- To develop a menu of educational programs that will be offered in multiple media formats, are cost effective, easy to use, and that are sensitive to the varied needs of different healthcare providers.
- To develop an extensive system of dissemination activities aimed at increasing the knowledge base and training of prescribers from diverse multi-disciplinary healthcare backgrounds.
- To develop a novel system of peer support and mentoring for healthcare providers to increase confidence in the ability to safely and effectively utilize opioids in patients with chronic pain or opioid use disorders.

Prescribers’ Clinical Support System for Opioid Therapies (PCSS-O) Year One

- Conference Call: Examining Prescription Drug Abuse and the Role of the Dental Professional
- Webinar: A Review of Prescription Opioid Abuse for the Dental Community
- Webinar: Chronic Opioid Therapy in Dentistry
- ADA Annual Session: Management of Pain in the Chemically Dependent Patient

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Prescribers’ Clinical Support System for Opioid Therapies (PCSS-O) Discussion

• What information (or training content) would most inspire dentists to improve (or be more mindful of) their prescribing practices?
• What vehicles would be ideal for imparting the information to dentists (e.g., webinars, etc)?
• What can the ADA and state societies do to inspire dentists to seek out these training opportunities?

Questions?

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