

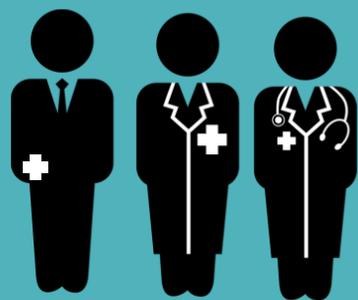
OPIOID ABUSE PREVENTION AND TREATMENT: LESSONS FROM SOUTH CAROLINA

Objective: To examine the strengths and weaknesses of South Carolina's state action plan addressing opioid-related overdoses and deaths and to make recommendations to improve the state's opioid abuse prevention plan.

BACKGROUND

Opioid Crisis in South Carolina (SC):

- SC is one of the states in the southern region of the United States that experiences an unusually high rate of opioid-related deaths.
- In 2016, 616 deaths occurred in SC from drug overdoses from prescription opioid drugs, up 9% from 2015.
- Nearly 4.5 million opioid prescriptions were filled in 2015 in SC, which is greater than 1.5 times the national average.



ACCESS TO TREATMENT

- Americans with opioid abuse disorder may find it increasingly difficult to access evidence-based medical treatment due to few medical specialists engaging in national training and mentoring programs on medication-assisted treatment for those with substance abuse disorder.

EDUCATION AND TRAINING

To expand education and training efforts to end prescription drug overdose, SC should:

- promote and support using Center for Disease Control & Prevention (CDC) Guidelines for Prescribing Opioids for Chronic Pain;
- pass legislation (H 3831) calling for mandatory higher education on prescribing controlled substances when training health care professionals;
- develop public education campaigns and training for prevention of substance abuse and overdose;
- collaborate with academic medical institutions to sponsor pain management education programs; and
- develop policies to assist those in treatment to find and maintain employment through educational programs for employers and employees.



CRIMINAL JUSTICE SYSTEM

- SC should pass legislation requiring some minimum amount (eg, 15%) of lawsuit settlement funds received from the pending pharmaceutical litigation be used for substance use disorder treatment.

PRESCRIPTION MEDICATION ACCESS

- SC should utilize Prescription Monitoring Programs (PMP) to reduce the overprescription of opioid medications by identifying individuals at high risk for substance use disorder based on prescription patterns and other risk factors.



COMMUNITY COORDINATION



- SC should consider the responsibility that local and federal agencies may hold in perpetuating stigma and shame when proposing community-level interventions.
- Community coordination with local pharmacies is necessary to prioritize safe disposal of drugs and access of services for victims of substance abuse disorder.

IMPLICATIONS

- The implementation and expansion of a PMP is a critical step in tracking opioid deaths and identifying high-risk prescribers.
- Practitioners and policy makers should advocate and support alternative forms of pain management to reduce overprescribing of opioid medication.
- Academic medical centers need to train more informed health care professionals to adequately address pain.



SOURCE: ARNOLD, J.; ARSHONSKY, J.; BLOCH, K.; HOLZMAN, E.; SADE, R. OPIOID ABUSE PREVENTION AND TREATMENT: LESSONS FROM SOUTH CAROLINA. J PUBLIC HEALTH MANAG PRACT. 2019 MAY-JUN; 25 (3): 221–228 DOI:10.1097/PHH.0000000000000897

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