ALASKA
MEDICATION ASSISTED TREATMENT (MAT) EXPANSION

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State of Alaska Division of Behavioral Health
New grant award to the state of Alaska by Substance Abuse Mental Health Services Administration

$1,000,000 per year for 3 years

Increase the number of individuals able to receive MAT services in Anchorage and Juneau (based on research needs/prevalence)

Request for Proposal Solicitation has been posted and will close October 26, 2016
OPIOID EPIDEMIC

Frontline PBS, Chasing Heroin, 2016
Drug overdoses are now the leading cause of accidental death in America, surpassing traffic fatalities, with more than 36,000 deaths annually.

Alaska: During 2009–2015, 774 drug overdose deaths were entered into the Alaska mortality database. Overall, 512 (66%) decedents had a prescription drug noted as the primary or a contributing cause of death.
FACES OF OPIOID ADDICTS

PBS Frontline Chasing Heroin February 2016

https://youtu.be/TQLR4Tu61Ws?t=137

https://youtu.be/TQLR4Tu61Ws?t=756

https://youtu.be/TQLR4Tu61Ws?t=1411
DEMOGRAPHICS OF OPIOID USE DISORDERS IN ALASKA

- Male: 776 (45%)
- Female: 942 (55%)
DEMOGRAPHICS OF OPIOID USE DISORDERS IN ALASKA

- 69%: 1181 (69%)
- 15%: 257
- 10%: 177
- 4%: 27
- 1%: 11
- 1%: 1

- 65+: 65
- 45-64: 257
- 21-24: 177
- 18-20: 27
- 13-17: 11
DEMOGRAPHICS OF OPIOID USE DISORDERS IN ALASKA

- White: 591 (58%)
- Am Indian/AK Native: 323 (19%)
- Multi-Racial: Part Am Indian/AK Native: 281 (16%)
- Black/African American: 47 (3%)
- Asian: 28 (2%)
- Hawaiian/Other Pacific Islander: 33 (2%)
- Race Not Available: 7 (0%)
Alaska presently only has a MAT practice capacity for 275 individuals in its two nonprofit agencies and currently 200 individuals in the one for-profit (another for-profit just came online). With upwards of 1,700 individuals with an Opioid Dependence or Abuse Disorder diagnosis seeking treatment, this leaves over 72% of known individuals going without MAT.

New MAT funding expected to increase MAT capacity in Anchorage and Juneau up to 250 by the second year.
“Access to medication-assisted treatment can mean [the] difference between life or death.” Michael Botticelli, October 23, 2014 Director, White House Office of National Drug Control Policy.
Medication Assisted Treatment is the use of medications *in combination with counseling and behavioral therapies*, providing a **whole-patient approach** to the treatment of substance use disorders.

MAT for opioid addiction utilizes medications to stabilize brain chemistry, block the euphoric effects of opioids, relieve physiological cravings, and normalize body functions. Numerous studies have shown that MAT practice reduces drug use, disease rates, and criminal activity among opioid addicted persons.
Withdrawal Management (formerly “detoxification”), followed by a focus on total abstinence, has shown little success in reducing illicit opioid use.

Evidence for the effectiveness of methadone maintenance treatment (MMT) is high.

Evidence for the effectiveness of buprenorphine maintenance treatment (BMT) is high.

Evidence for naltrexone maintenance treatment effectiveness is successful but depends on the characteristics of the population served.
**TERMS EXPLAINED**

- **Analgesic:** those drugs that mainly provide pain relief
- **Partial agonist:** drugs that bind to and activate a given receptor, but have only partial efficacy at the receptor relative to a full agonist
- **Antagonist:** A drug that blocks or reduces the effect of a neurotransmitter
Methadone: **Is an Analgesic** — any agent that relieves pain.

Used as a maintenance drug to control withdrawal symptoms in people undergoing treatment for opiate addiction.

Methadone has also been shown to reduce cravings for heroin while not altering a person's mood.

Liquid form, taken under supervision, generally every day, with “take homes” as person matures in treatment.
FDA APPROVED MEDICATIONS FOR MAT:
BUPRENORPHINE

- Buprenorphine: a mixed **partial agonist** opioid receptor modulator
- Buprenorphine has the advantage of being only a partial agonist; hence negating the potential for life-threatening respiratory depression in cases of abuse
- Studies show the effectiveness of buprenorphine and methadone are almost identical
- Is taken as a pill or sublingual film under supervision, generally daily
Naltrexone: long acting opioid antagonist; blocks opiate receptors in the nervous system and is used chiefly in the treatment of alcohol addiction and recently in heroin addiction

- Patient must complete withdrawal to begin use
- Most effective with individuals who are either young, highly motivated to be clean, and/or have several positive life supports (employment, family, etc.)
- Naltrexone helps patients overcome opioid addiction by blocking the effects of opioid drugs. It has little effect on opioid cravings
- Taken in pill (daily) or as a intermuscular injection once a month
MAT IS MORE THAN MEDICATION-BASED TREATMENT

Must be an Integrated Approach

Each individual receiving a MAT service will have:

- A substance use intake assessment
- An integrated mental health and substance use intake
- An individualized treatment plan
MAT ISN’T JUST MEDICATION TREATMENT

An Individualized Treatment Plan should cover:
- (A) case management;
- (B) addiction treatment;
- (C) health care;
- (D) mental health;
- (E) social services;
- (F) vocational services; and
- (G) housing services.
DOCUMENTARIES TO WATCH

- "Heroin: The Hardest Hit" 2016 Documentary on Heroin Addiction and Prescription Pill Abuse (Royal Life Centers)
- PBS Frontline: “Chasing Heroin”
- “America's Bleeding, Addicted To Heroin” - Documentary 2016 (Documentary TV Movies 2016)
- “Medication-Assisted Treatment Overview: Naltrexone, Methadone & Suboxone” (Partnership for Drug-Free Kids)