

A PRIMARY CARE APPROACH TO TREATING SUBSTANCE USE DISORDERS UPCOMING TRAININGS

Session 1: January 24, 2024
A Public Health View of Substance Use Disorder
presented by Dr Greg Holzman

Session 2: February 7, 2024
Low Threshold Care
presented by Dr Dan Nauts

Session 3: February 21, 2024
Initiating Buprenorphine and Maintenance
presented by Dr Bob Sise

Session 4: March 6, 2024
Opioid Use Disorder and Social Determinates of Health
presented by Dr Robert Sherrick

Session 5: March 20, 2024
Managing Patients with Opioid Use Disorder and Pain
presented by Dr Dan Nauts

Session 6: April 3, 2024
Adolescents and Opioids
presented by Dr Bob Sise



Session 7: April 17, 2024
Methadone: Another Option
presented by Dr Robert Sherrick

Session 8: May 1, 2024
Xylazine and Emerging Substances of Abuse
presented by Dr Dan Nauts

Session 9: May 15, 2024
Harm Reduction: What's happening in Montana
presented by Christa Weathers

Session 10: May 29, 2024
Stimulant Use Disorder and ADHD
presented by Dr Ty Reidenbaugh

Session 11: June 12, 2024
Treatment of Stimulant Use Disorder: Psycho-Social Interventions and Medications
presented by Dr Bob Sise

Session 12: June 26, 2024
Stimulants: When to do Anti-Psychotics
presented by Dr Bob Sise

Session 13: July 10, 2024
**Collaborating with Your Pharmacist for MOUD
(Medications for Opioid Use Disorder)**
presented by Dr Travis Schule



A PUBLIC HEALTH VIEW OF SUD

GREG HOLZMAN, MD, MPH

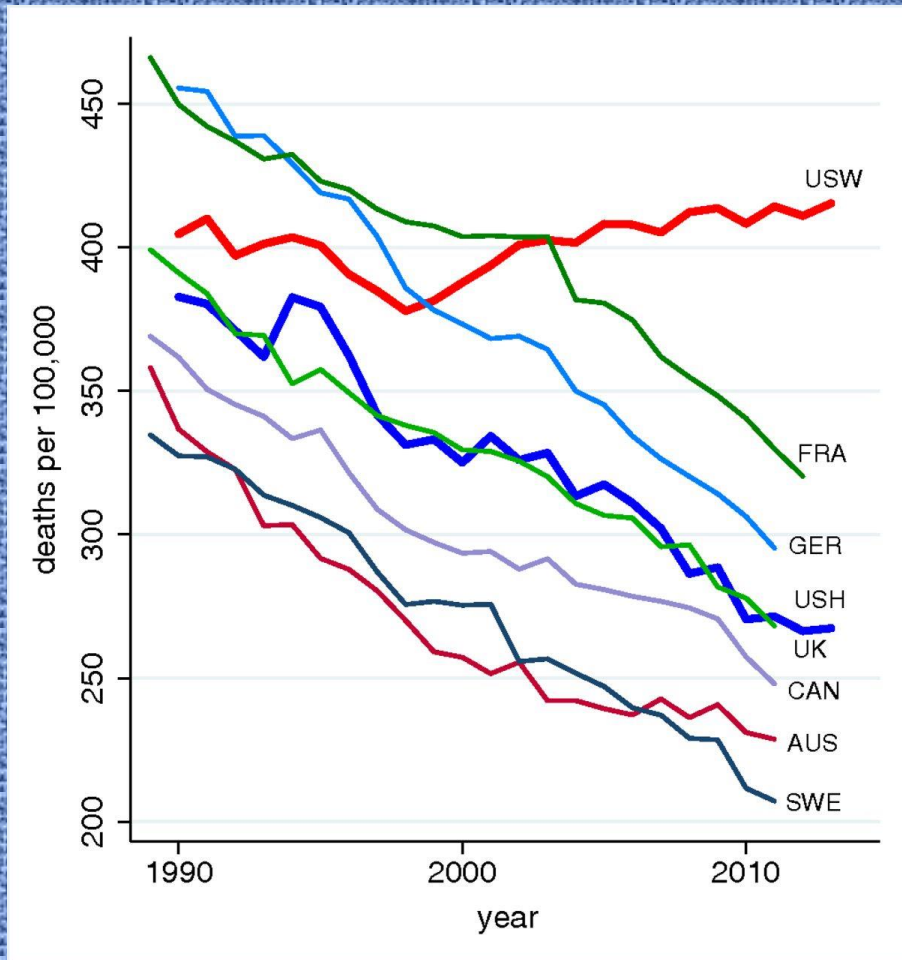
“DEATHS’ OF DESPAIR” COINED BY PRINCETON ECONOMISTS ANGUS DEATON AND ANNE CASE



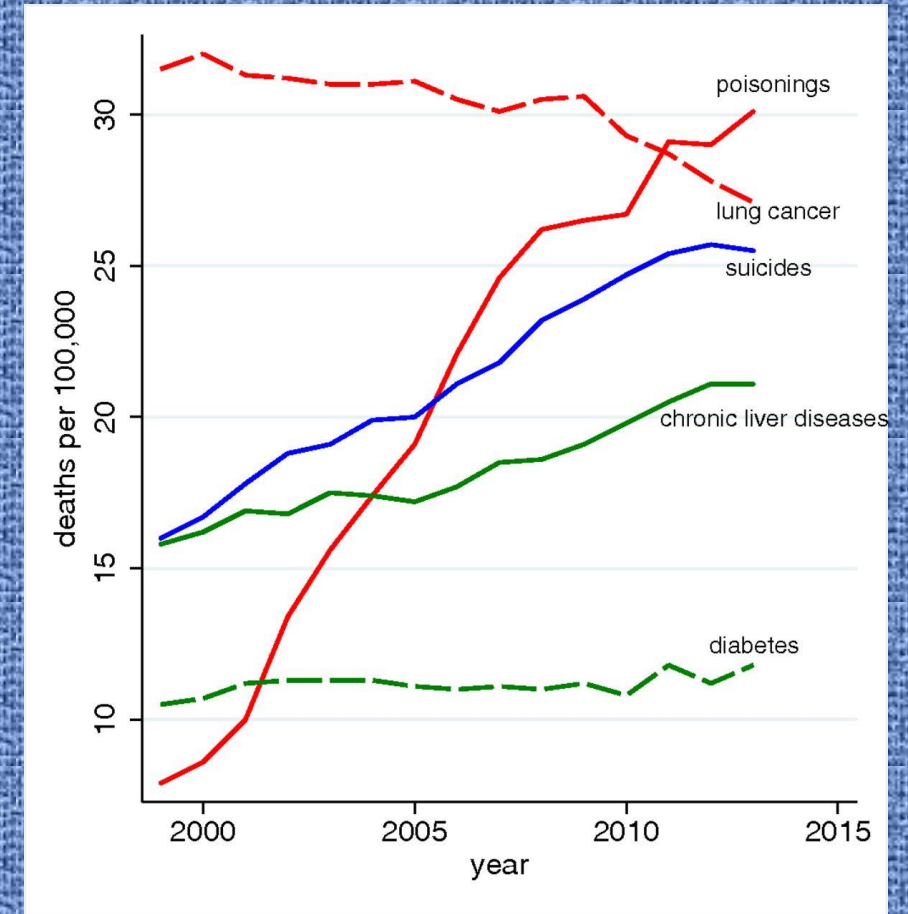
DOWNLOADED – FROM THE INTERNET ON Q-22-24 [HTTPS://WWW.WHY.ORG/EPISODES/DEATHS-OF-DESPAIR/](https://www.whyy.org/episodes/deaths-of-despair/) ANNE CASE AND ANGUS DEATON, PRINCETON ECONOMISTS AND HUSBAND-AND-WIFE CO-AUTHORS OF THE NEW BOOK, "DEATHS OF DESPAIR AND THE FUTURE OF CAPITALISM." (PHOTO CREDIT, REBECCA WILCOX)

RISING MORBIDITY AND MORTALITY IN MIDLIFE AMONG WHITE NON-HISPANIC AMERICANS IN THE 21ST CENTURY

All-cause mortality, ages 45 -54 for US White non- Hispanics



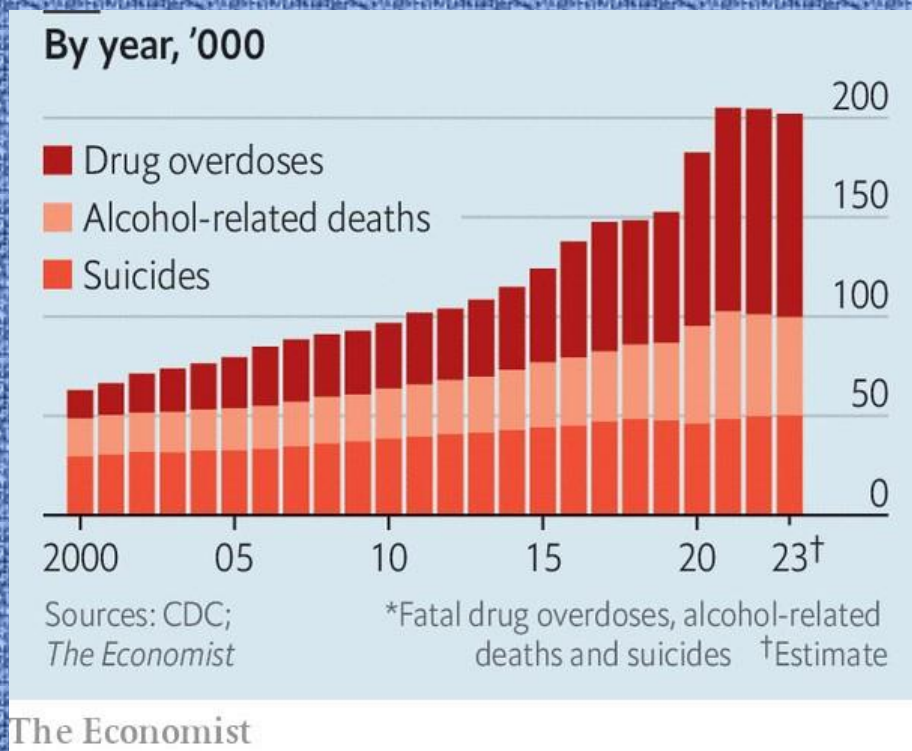
Mortality by cause, white non-Hispanic ages 45-54



RIVER ANALOGY



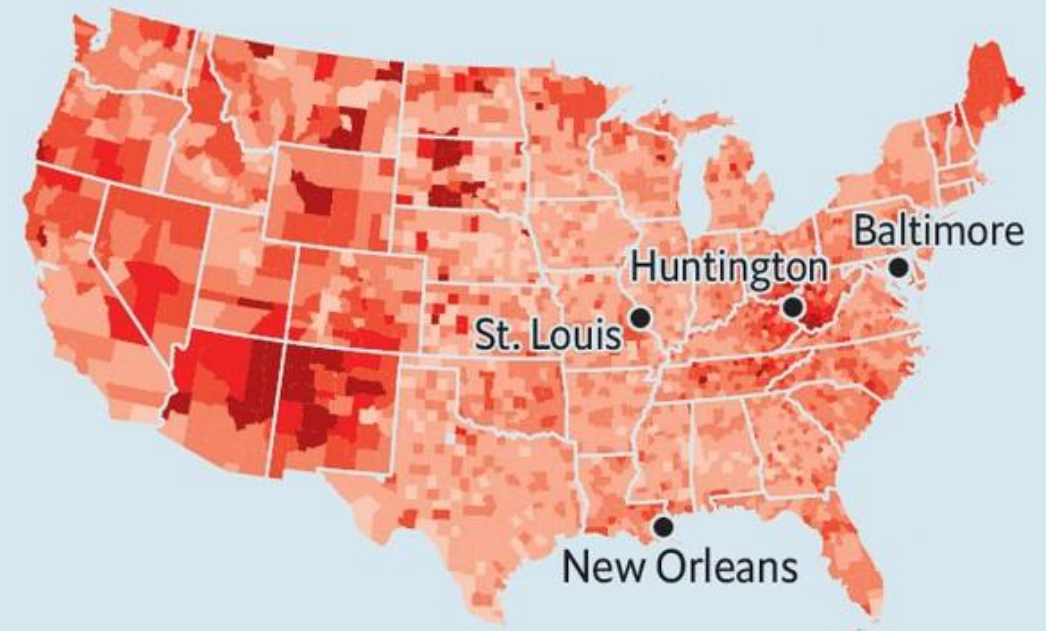
DEATHS OF DESPAIR



Anatomy of an epidemic

United States, "deaths of despair"*

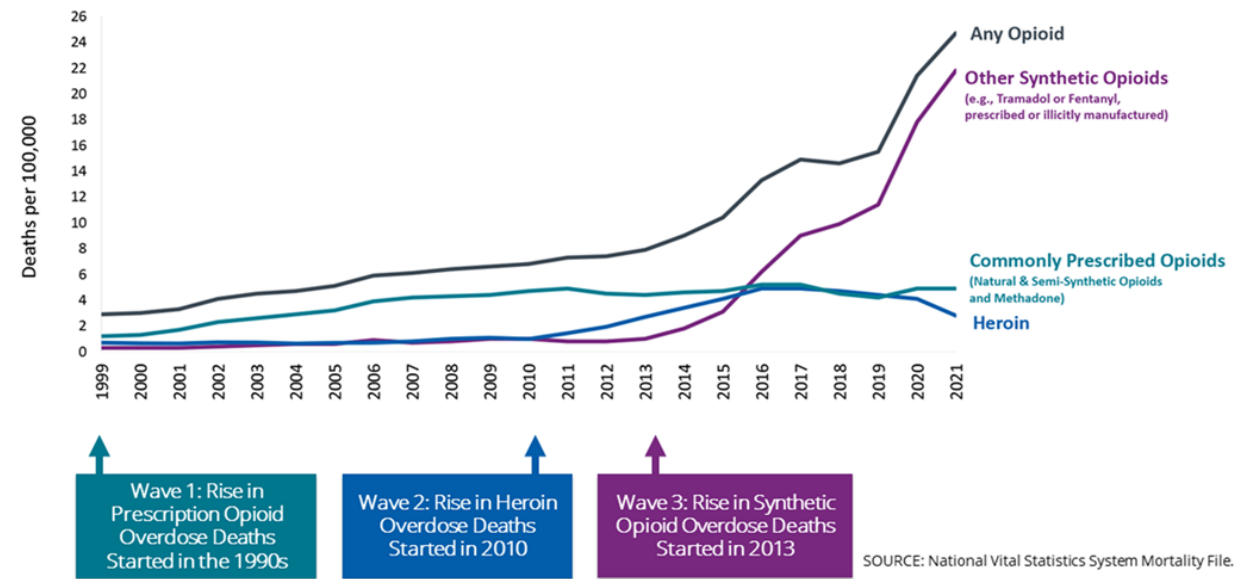
2020-22 average, per 100,000 population



CHANGING EPIDEMIC

- Neurobiological Vulnerabilities
- Social Determinants of Health
- Environmental
- Economic
- Support / Connection
- Etc., etc., etc.

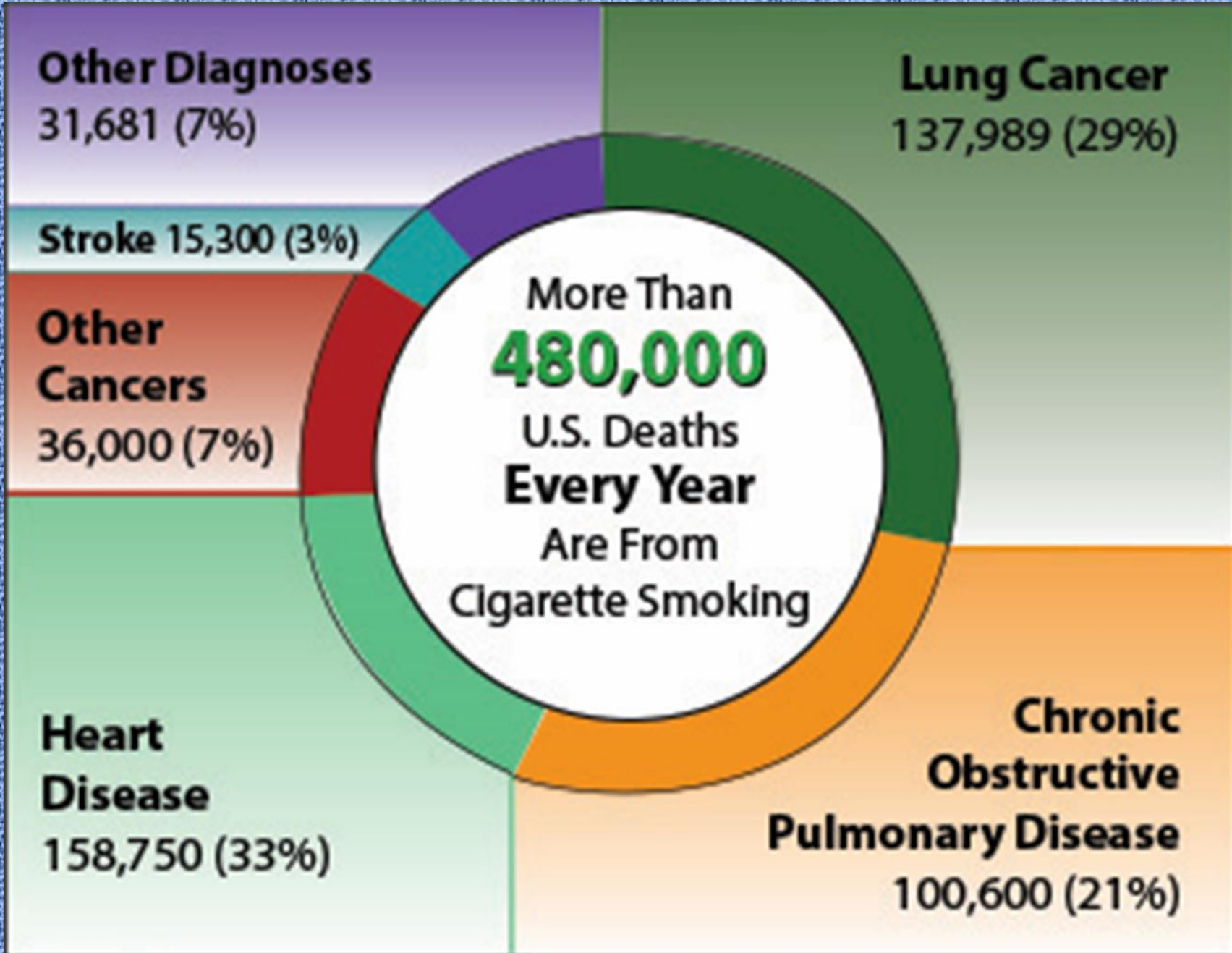
Three Waves of Opioid Overdose Deaths





Statistics are
human beings
with the tears
wiped away.

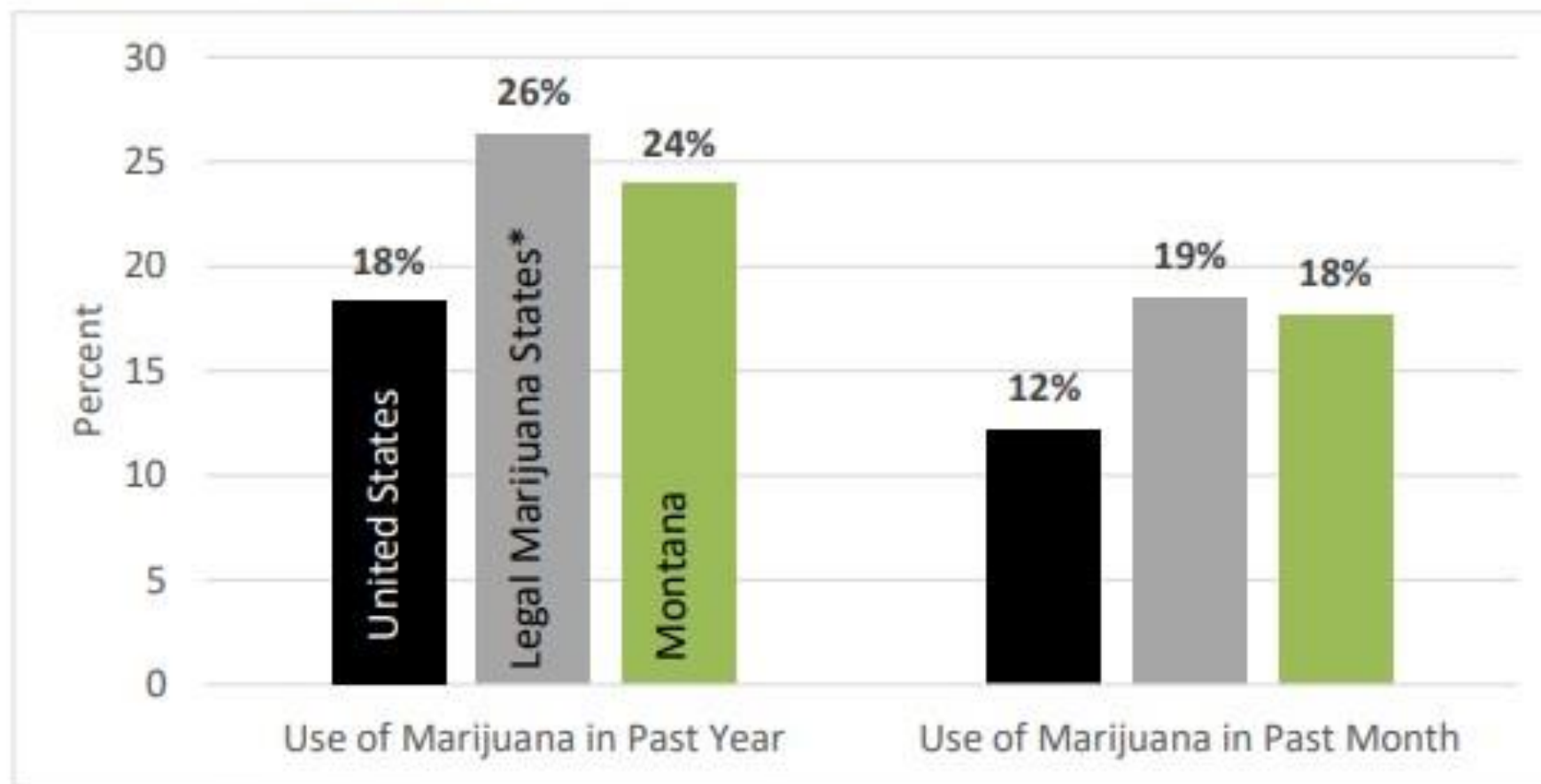
-- Paul Brodeur



Marijuana—which can also be called cannabis—is the most commonly used federally illegal drug in the United States, with an estimated 48.2 million people using it in 2019.



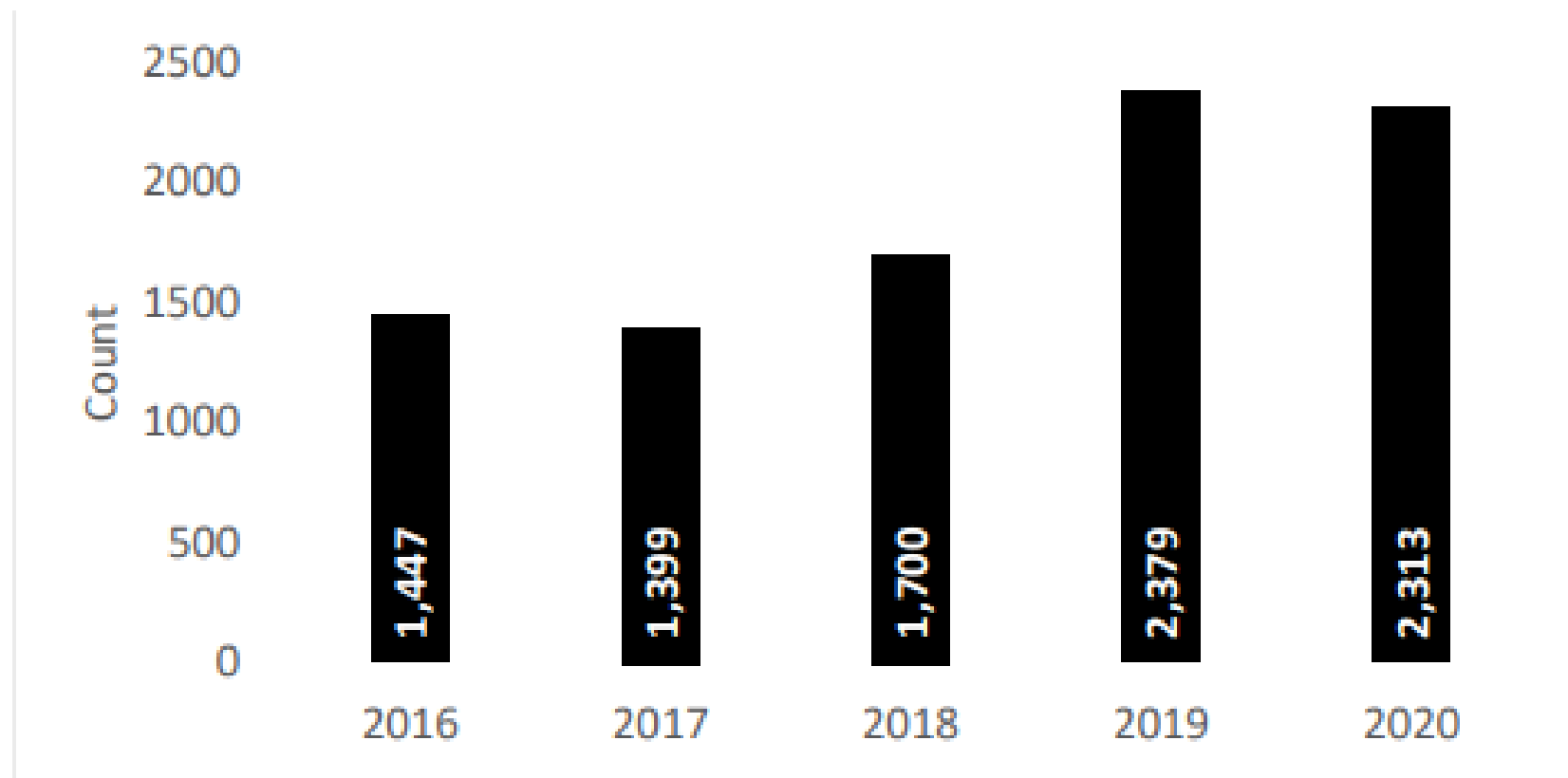
Figure 1. Self-Reported Marijuana Use Among Adults Aged 18+, United States, States with Legal Adult-Use Marijuana*, and Montana, 2019-2020



National Survey on Drug Use and Health, 2019-2020

*Legal adult-use marijuana states are states where marijuana could be purchased for non-medical purposes in 2019: Alaska, California, Colorado, Maine, Massachusetts, Michigan, Nevada, Oregon, Vermont, Washington, and Washington DC.

Figure 5. Emergency Department Visits Associated with Cannabis Use or Exposure, Montana, 2016-2020



Montana Hospital Discharge Data, 2016-2020



**More than 140,000 people die
from excessive alcohol use
in the U.S. each year**

There are more than **380** deaths each day in the US due to excessive alcohol use.

cdc.gov/alcohol



cdc.gov/alcohol

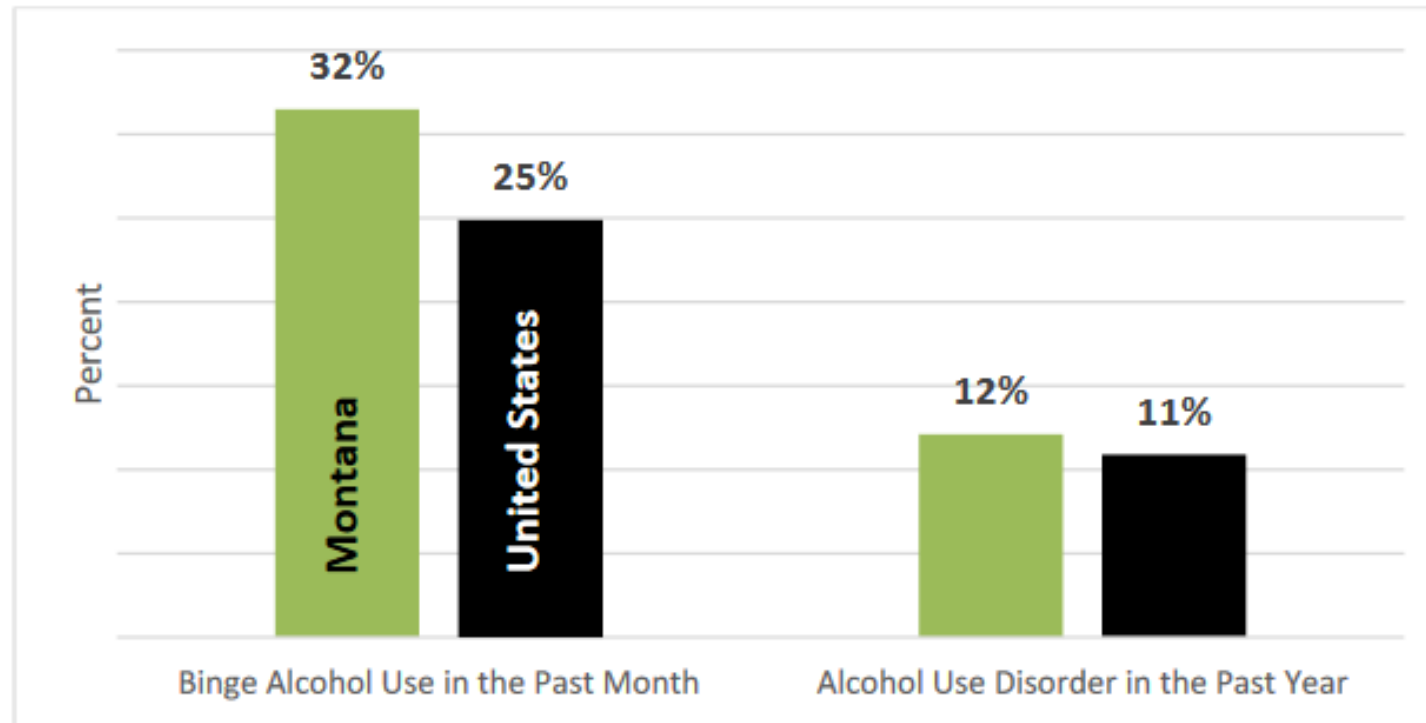
ALCOHOL USE IN MONTANA

	United States	Montana
Percent of adults aged 18+ who report drinking alcohol in the past month ¹	55% 2019-2020	63% 2019-2020
Percent of fatal crashes that involve an alcohol-impaired driver (BAC 0.08+) ^{2*}	29% 2020	46% 2020

Among Montanans receiving treatment for Substance Use Disorder in 2020 – 2021, 56% reported alcohol as their primary substance of misuse*

PUBLIC HEALTH IN THE 406 – ALCOHOL USE IN MONTANA
*NATIONAL SURVEY OF SUBSTANCE ABUSE TREATMENT SERVICES, 2020-2021

Figure 1. Self-Reported Binge Alcohol Use* and Percent Meeting Definition of Alcohol Use Disorder** Among Adults Aged 18+, **Montana** and the **United States**, 2019-2020



National Survey on Drug Use and Health, 2019-2020

**Binge alcohol use* is defined as consuming five or more drinks during a single occasion for men or four or more drinks during a single occasion for women

***Alcohol Use Disorder* is defined based on criteria from the *Diagnostic and Statistical Manual of Mental Disorders*, 5th edition (DSM-5). Symptoms include being unable to limit the amount of alcohol consumed, wanting to cut down on alcohol use but being unable to do so, and giving up or reducing social and work activities to use alcohol.

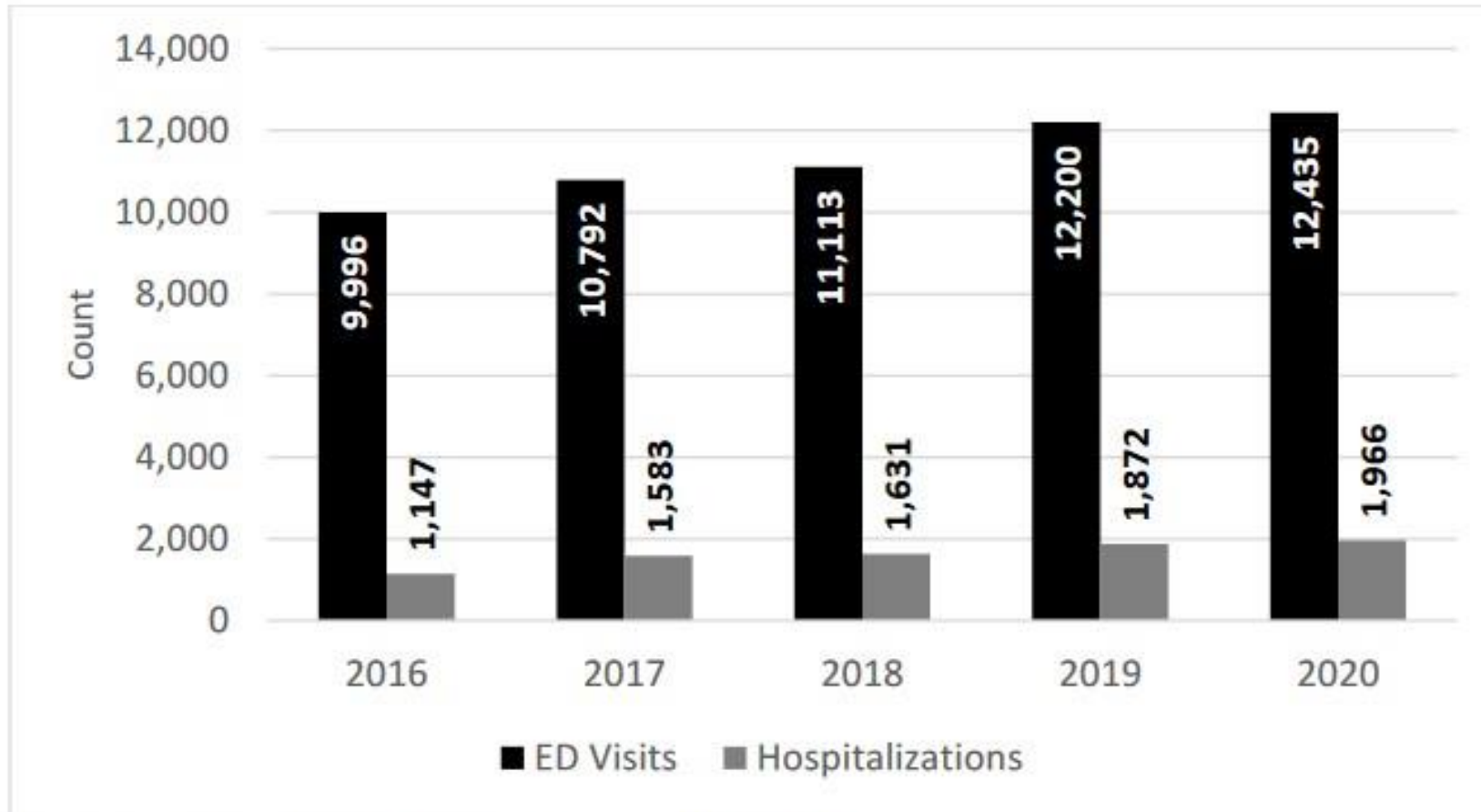
Figure 4. Self-Reported Use of Alcohol in the Past Month Among Adults Aged 18-25 Years, Montana and the United States, 2011-2020



National Survey on Drug Use and Health, 2011-2020

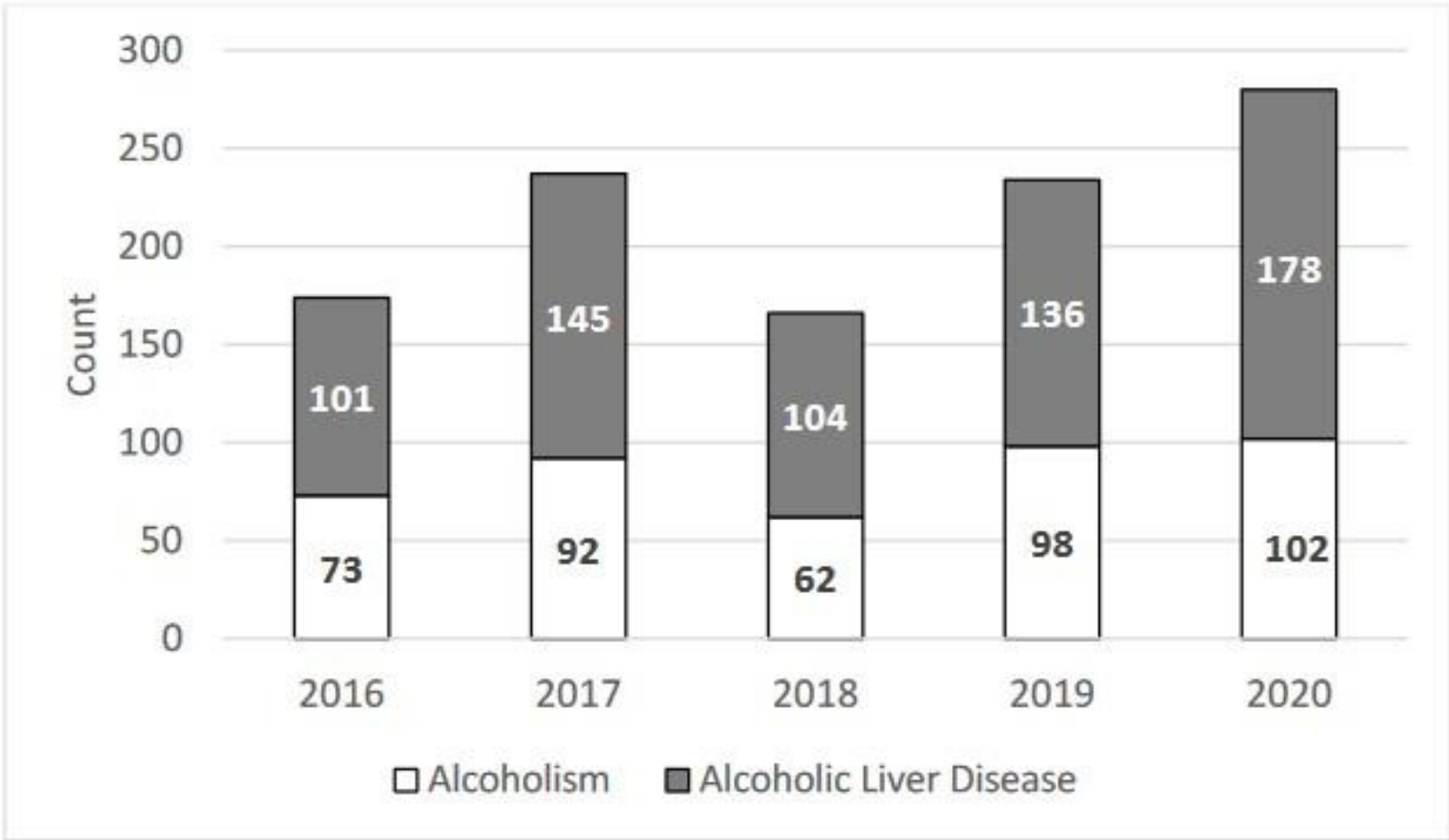
*Due to changes in methodology, data from 2019-2020 on cannot be directly compared to data from previous years.

Figure 5. Alcohol-Related Emergency Department Visits and Hospitalizations, 2016-2020



Montana Hospital Discharge Data System, 2016-2020

Figure 6. Montana Resident Deaths Attributed to Alcoholism and Alcoholic Liver Disease, 2016-2020



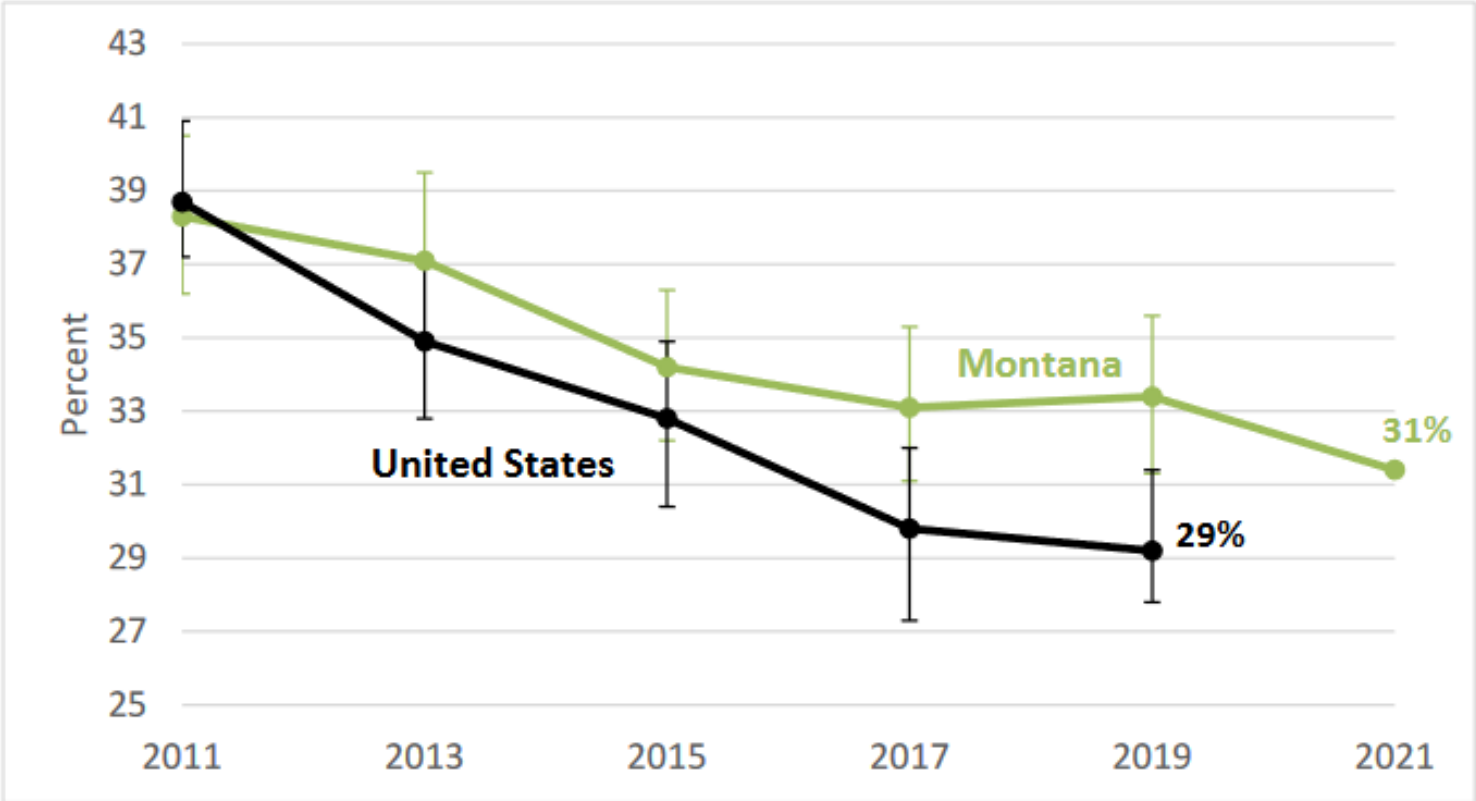
Source: Montana Vital Statistics, 2016-2020

DRIVING UNDER THE INFLUENCE

- 29 deaths per day in the US
- Between 2011 – 2020 in MT
 - 1,227 deaths and 2997 individuals were seriously injured secondary to an impaired driver
- 46 % of fatal crashes involve an impaired driver (Montana) 29% Nationwide

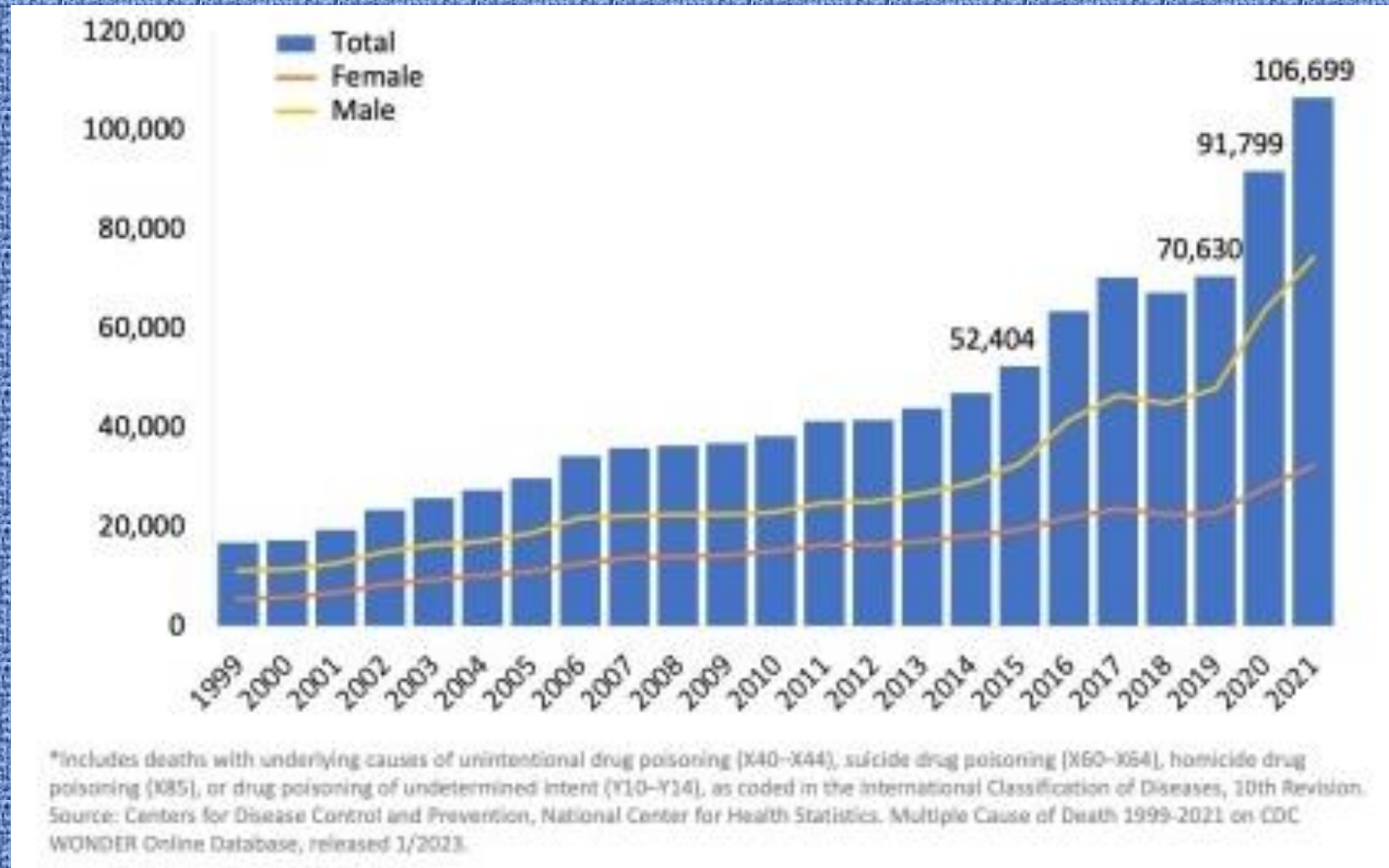


Figure 2. Self-Reported Use of Alcohol in the Past Month Among High School Students, Montana and the United States, 2011-2021*



Youth Risk Behavior Surveillance Survey, 2011-2021
*National YRBSS data for 2021 not released at time of writing this report

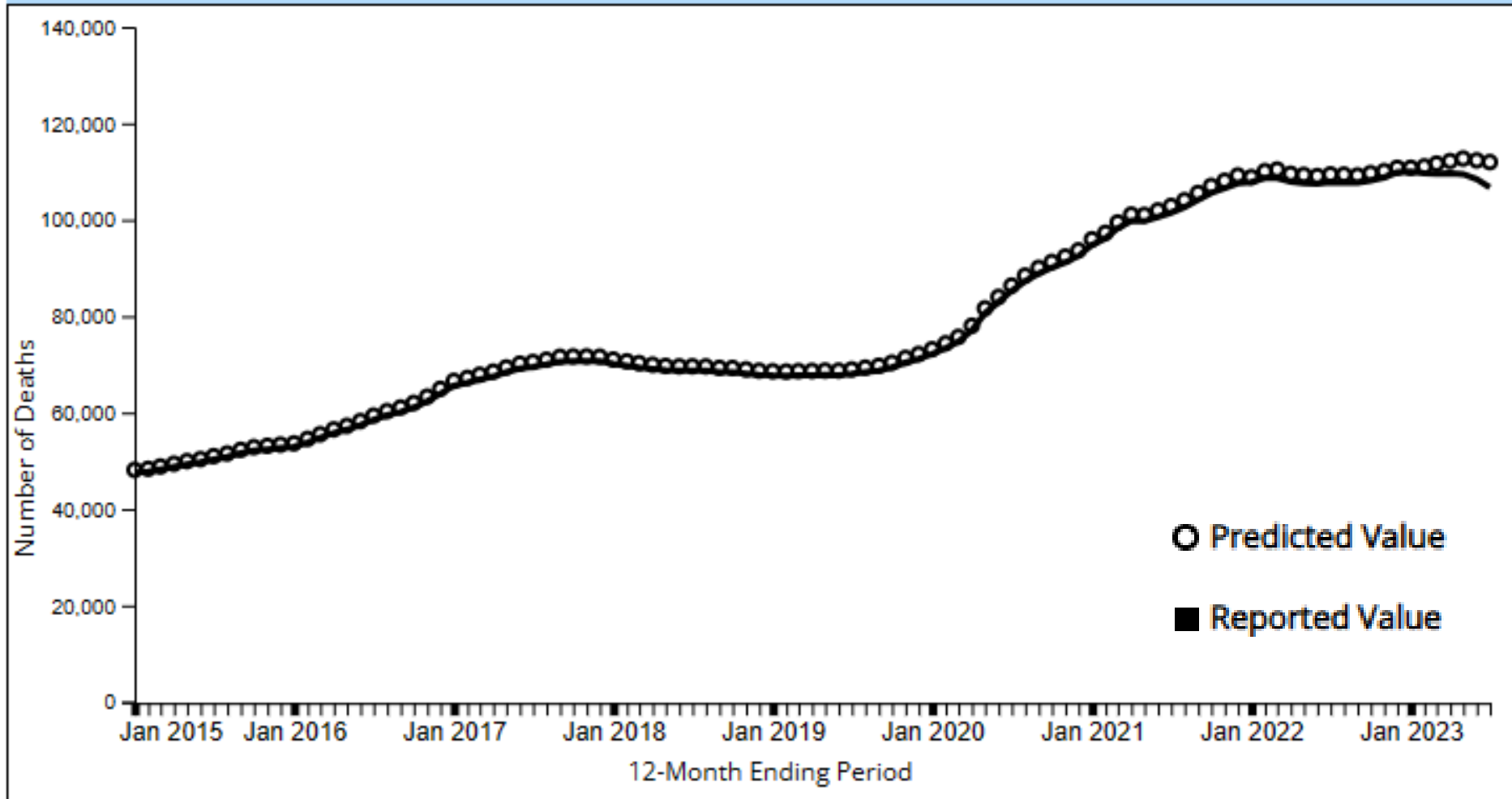
NATIONAL DRUG-INVOLVED OVERDOSE DEATHS*, NUMBER AMONG ALL AGES, BY GENDER, 1999 - 2021



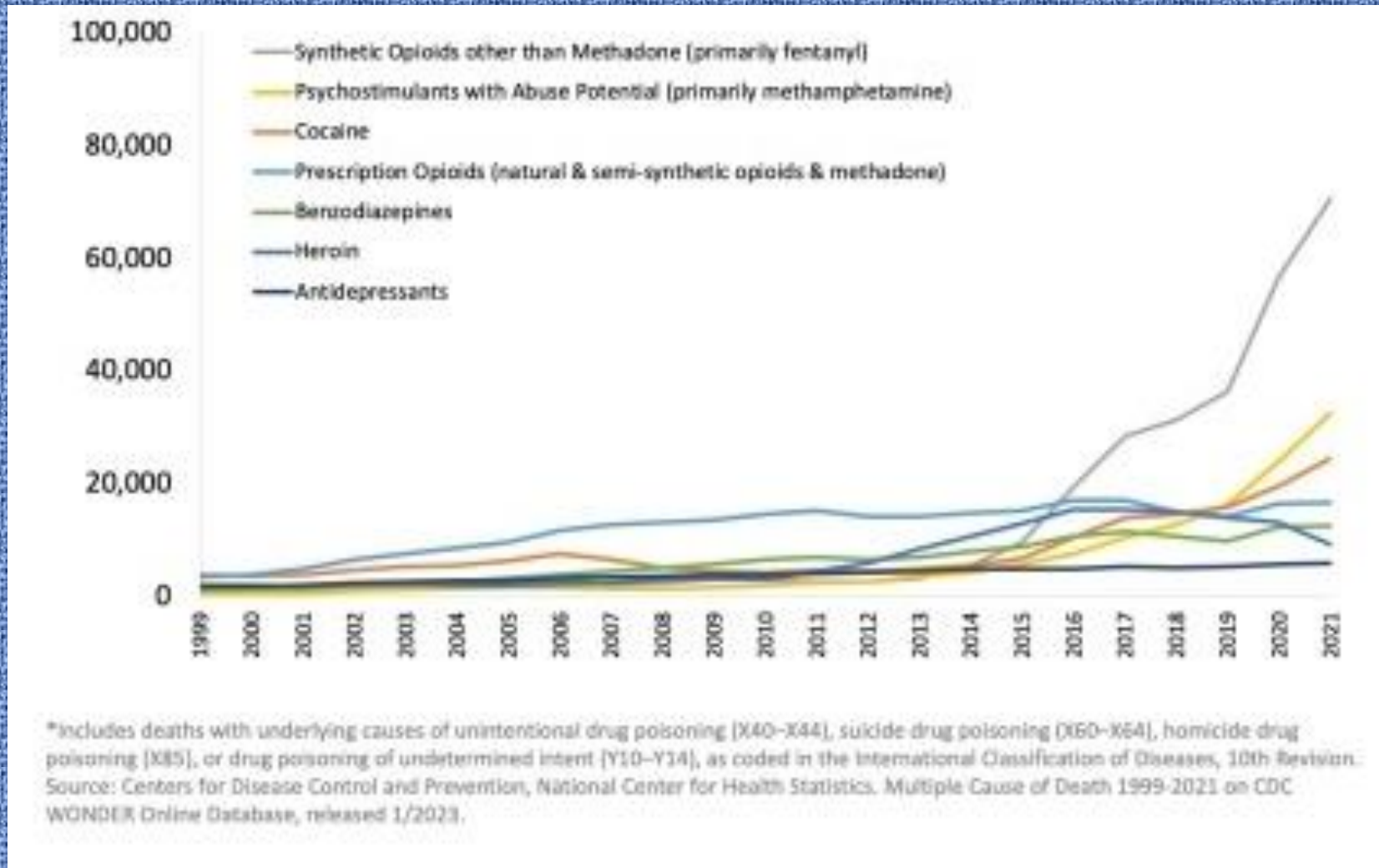
12 MONTH-ENDING PROVISIONAL NUMBER AND PERCENT CHANGE OF DRUG OVERDOSE DEATHS

Based on data available for analysis on: December 3, 2023

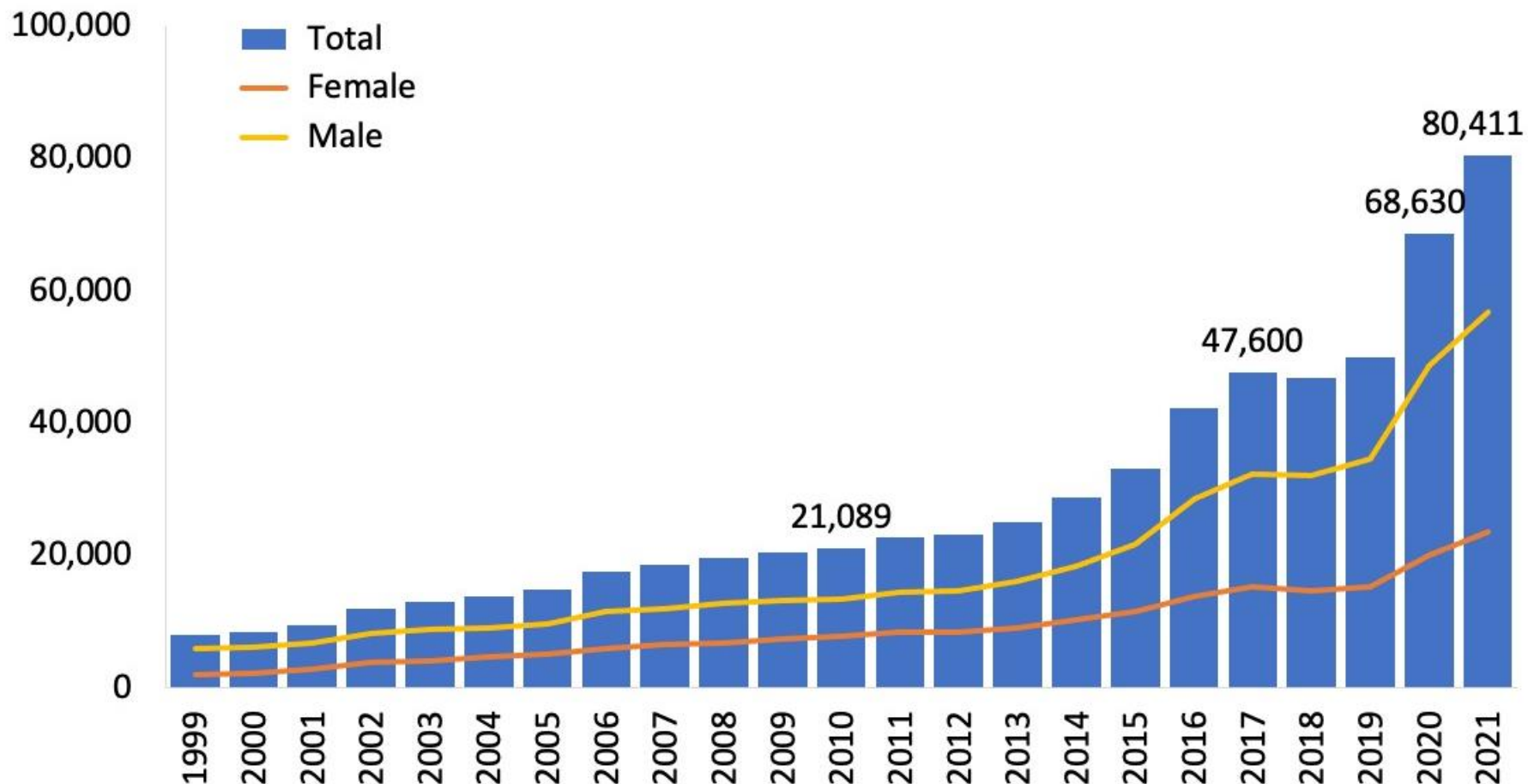
Figure 1a. 12 Month-ending Provisional Counts of Drug Overdose Deaths: United States



NATIONAL DRUG-INVOLVED OVERDOSE DEATHS*, NUMBER AMONG ALL AGES, 1999 - 2021

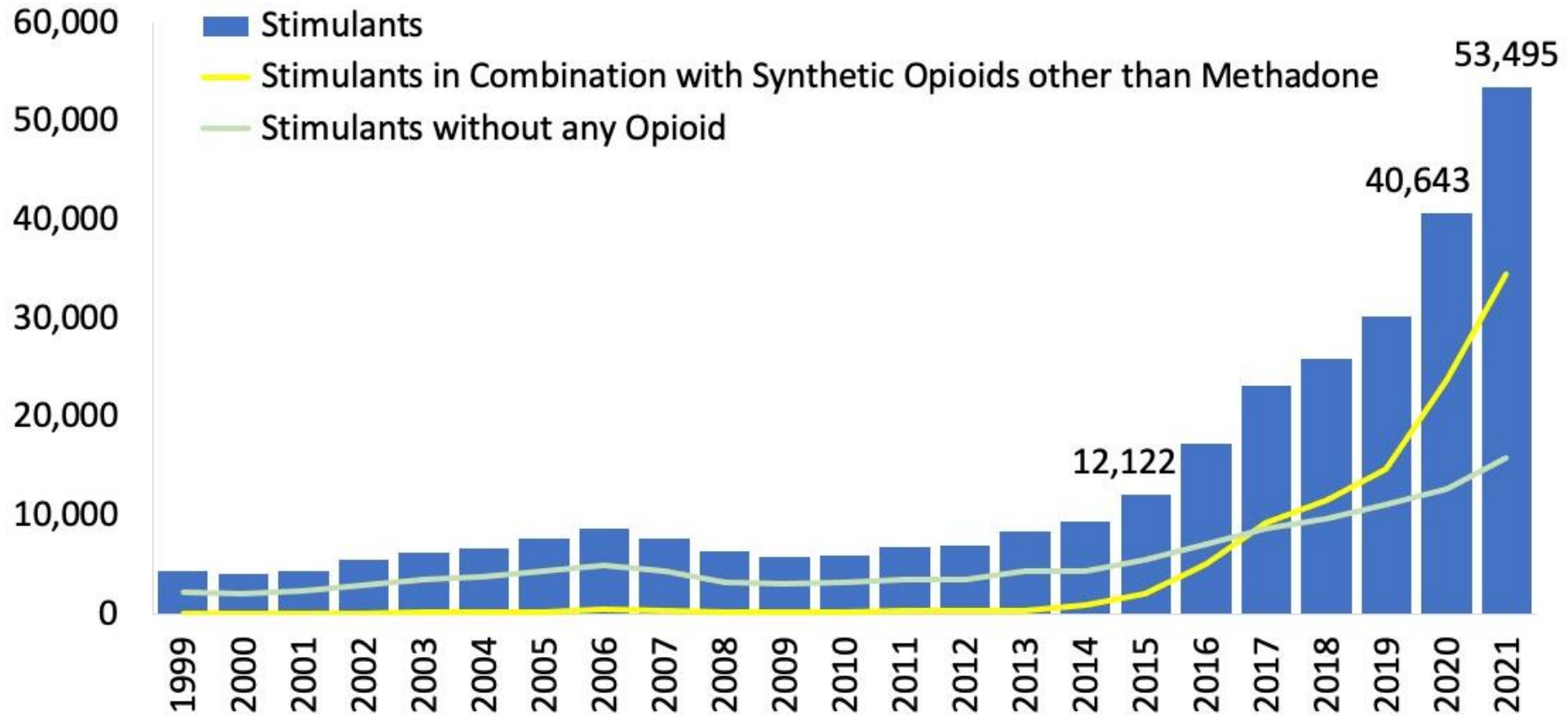


NATIONAL OVERDOSE DEATHS INVOLVING ANY OPIOID*, NUMBER AMONG ALL AGES, BY GENDER, 1999-2021



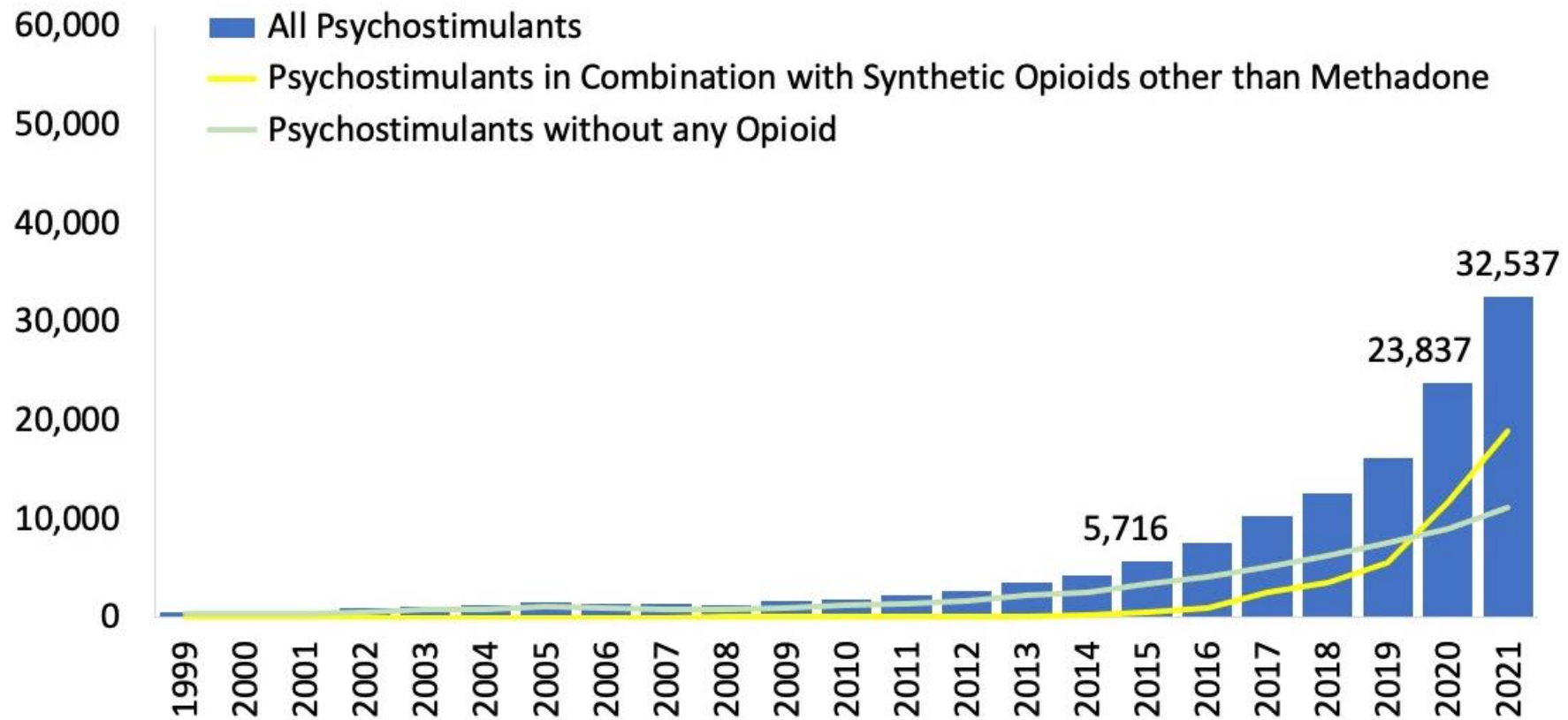
*Among deaths with drug overdose as the underlying cause, the “any opioid” subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2), methadone (T40.3), other synthetic opioids (other than methadone) (T40.4), or heroin (T40.1). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

NATIONAL OVERDOSE DEATHS INVOLVING STIMULANTS (COCAINE AND PSYCHOSTIMULANTS*), BY OTHER OPIOID INVOLVEMENT, NUMBER AMONG ALL AGES, 1999 - 2021



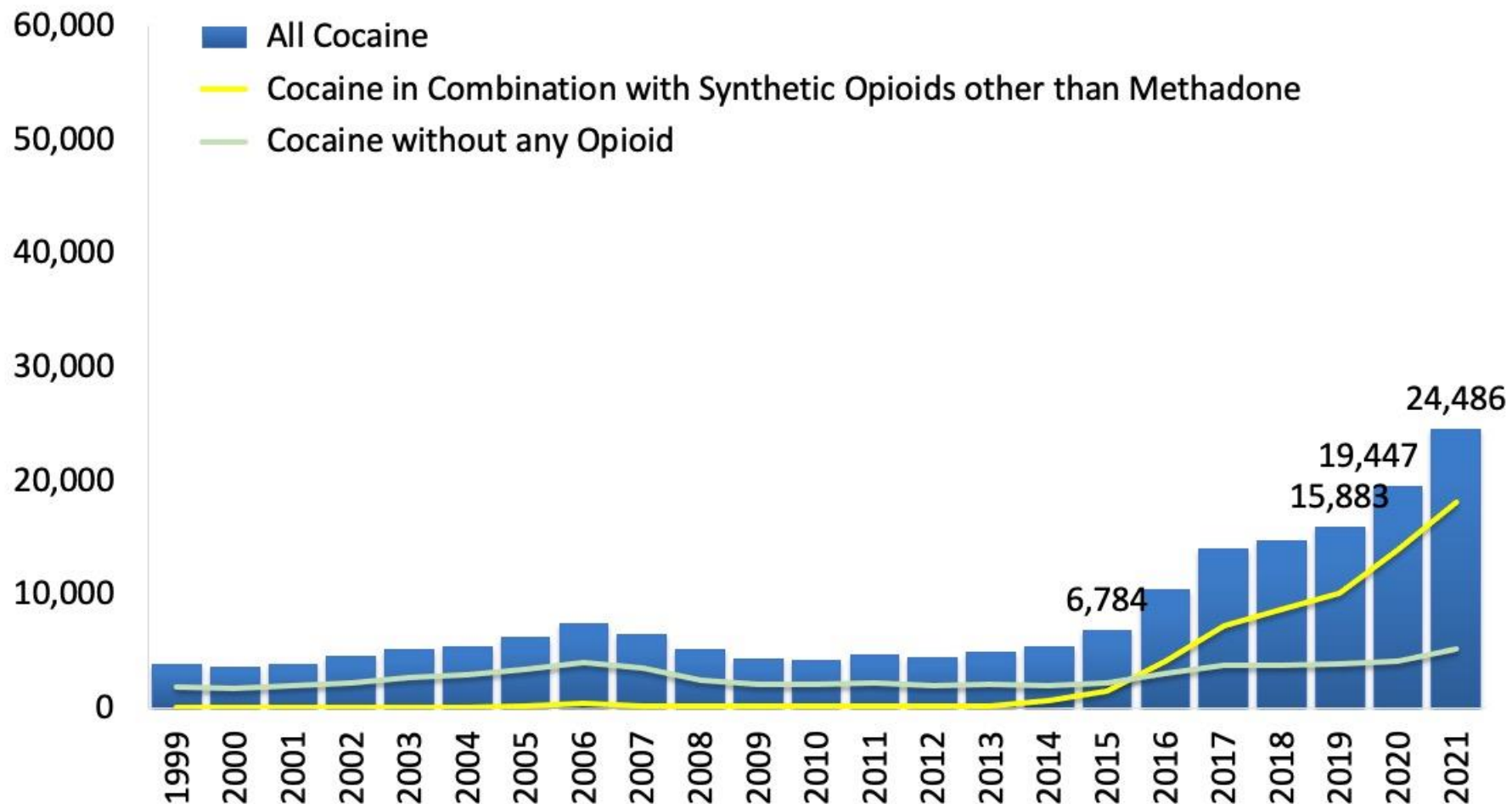
*Among deaths with drug overdose as the underlying cause, the psychostimulants with abuse potential (primarily methamphetamine) category was determined by the T43.6 ICD-10 multiple cause-of-death code. Abbreviated to *psychostimulants* in the bar chart above. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

NATIONAL OVERDOSE DEATHS INVOLVING PSYCHOSTIMULANTS WITH ABUSE POTENTIAL (PRIMARILY METHAMPHETAMINE*), BY OPIOID INVOLVEMENT, NUMBER AMONG ALL AGES, 1999 - 2021



*Among deaths with drug overdose as the underlying cause, the psychostimulants with abuse potential (primarily methamphetamine) category was determined by the T43.6 ICD-10 multiple cause-of-death code. Abbreviated to *psychostimulants* in the bar chart above. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

NATIONAL OVERDOSE DEATHS INVOLVING COCAINE*, BY OPIOID INVOLVEMENT, NUMBER AMONG ALL AGES, 1999 - 2021



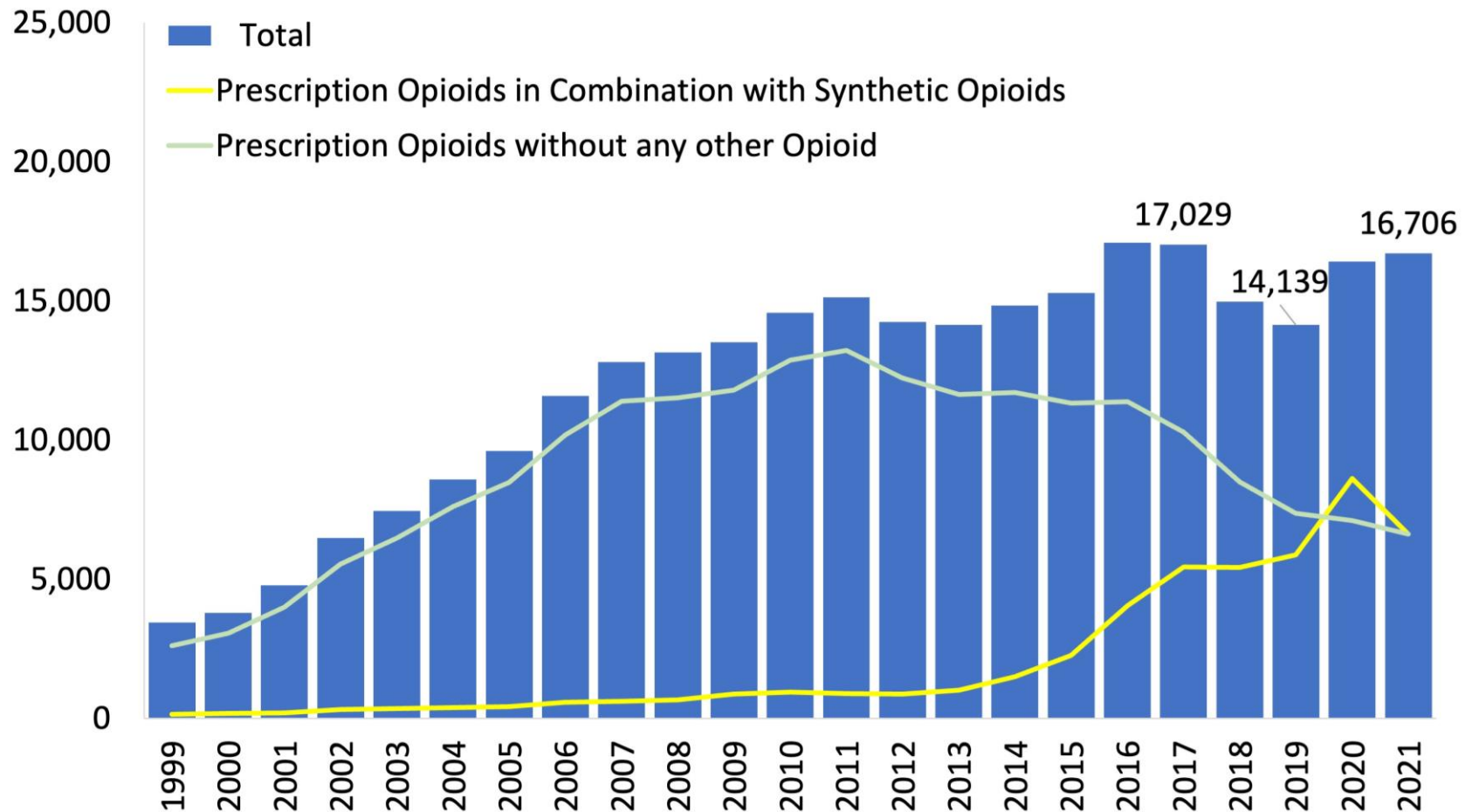
*Among deaths with drug overdose as the underlying cause, the cocaine category was determined by the T40.5 ICD-10 multiple cause-of-death code. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

METHAMPHETAMINE USE IN MONTANA

	United States	Montana
Percent increase in deaths caused by methamphetamine from 2018 to 2020 ¹	81% 2018-2020	150% 2018-2020
Percent of people aged 12+ who report using methamphetamine in the past year ²	0.9% 2019-2020	1.7% 2019-2020

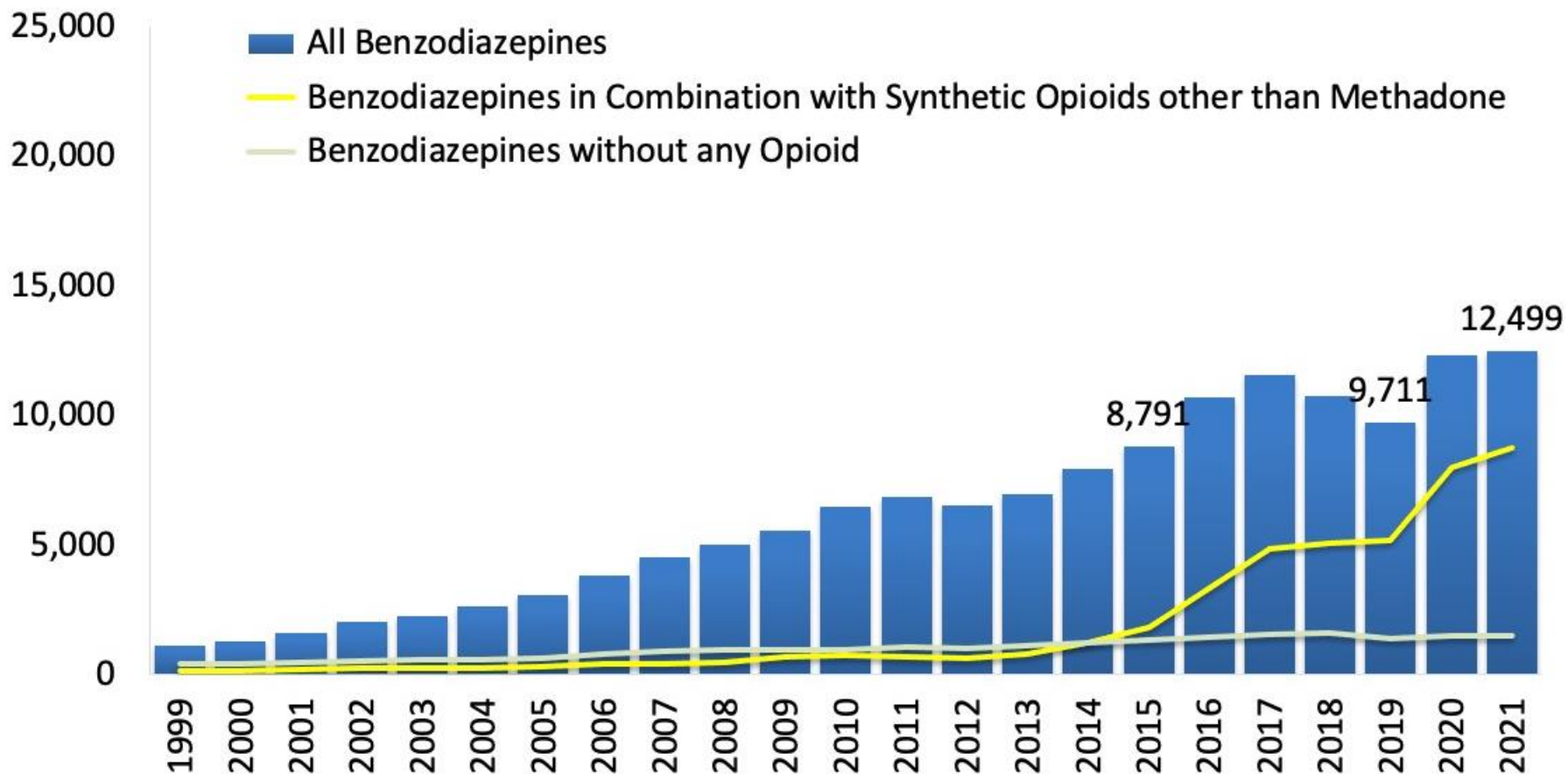
- 2012 – 2021 Methamphetamine and stimulant seizures increase by 385%
- 2020, methamphetamine was found in 48% of drug overdose deaths
- Excluding Alcohol Methamphetamine was the second most common drug found in impaired driver or postmortem blood samples (13 %)

NATIONAL OVERDOSE DEATHS INVOLVING PRESCRIPTION OPIOIDS*, NUMBER AMONG ALL AGES, 1999 - 2021



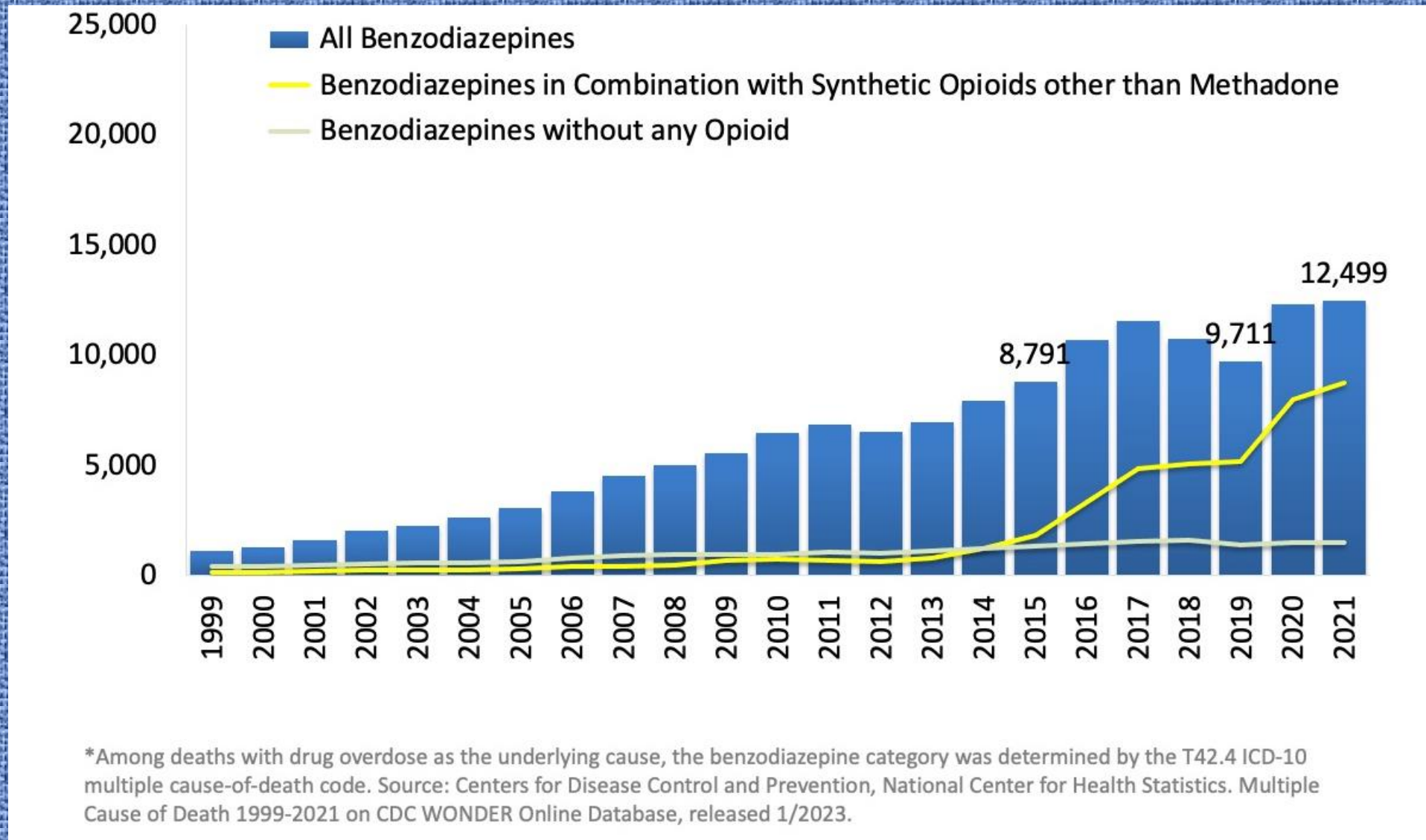
*Among deaths with drug overdose as the underlying cause, the prescription opioid subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2) or methadone (T40.3). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

NATIONAL OVERDOSE DEATHS INVOLVING BENZODIAZEPINES*, BY OPIOID INVOLVEMENT, NUMBER AMONG ALL AGES, 1999 - 2021



*Among deaths with drug overdose as the underlying cause, the benzodiazepine category was determined by the T42.4 ICD-10 multiple cause-of-death code. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

NATIONAL OVERDOSE DEATHS INVOLVING ANTIDEPRESSANTS*, BY OPIOID INVOLVEMENT, NUMBER AMONG ALL AGES, 1999 - 2021



NALOXONE SAVES LIVES

Increase amounts of substances adulterated with an opioid (fentanyl)

Other adulterations – ex: Nitazenes, Xylazine, etc.

Naloxone without treatment, often is just delaying death

<https://dphhs.mt.gov/BHDD/naloxone/wheretogotNaloxone>

PRESENTATION TITLE

Naloxone Ordering in Montana

To Order:

- 1 Go to naloxone.mt.gov
- 2 Click “Order Naloxone”
- 3 Click “DPHHS Order Authorization Form”
- 4 Complete and submit form
- 5 Orders typically take 1-2 weeks to process and ship

Note: Formal training is not required to order or administer naloxone. Basic instructions are available with the medication.

What are opioids?

Opioids are a class of drugs that include illegal drugs like heroin, synthetic fentanyl, and prescription medications used to treat pain such as oxycodone (Oxycontin®) and hydrocodone (Vicodin®).

What is naloxone?

Naloxone is a FDA approved medication that rapidly reverses an opioid overdose. Naloxone blocks the effects of opioids on the brain and restores breathing. If naloxone is given to a person who is not experiencing an opioid overdose, it is harmless. Naloxone can save lives.

Visit TogetherWeCanMT.com

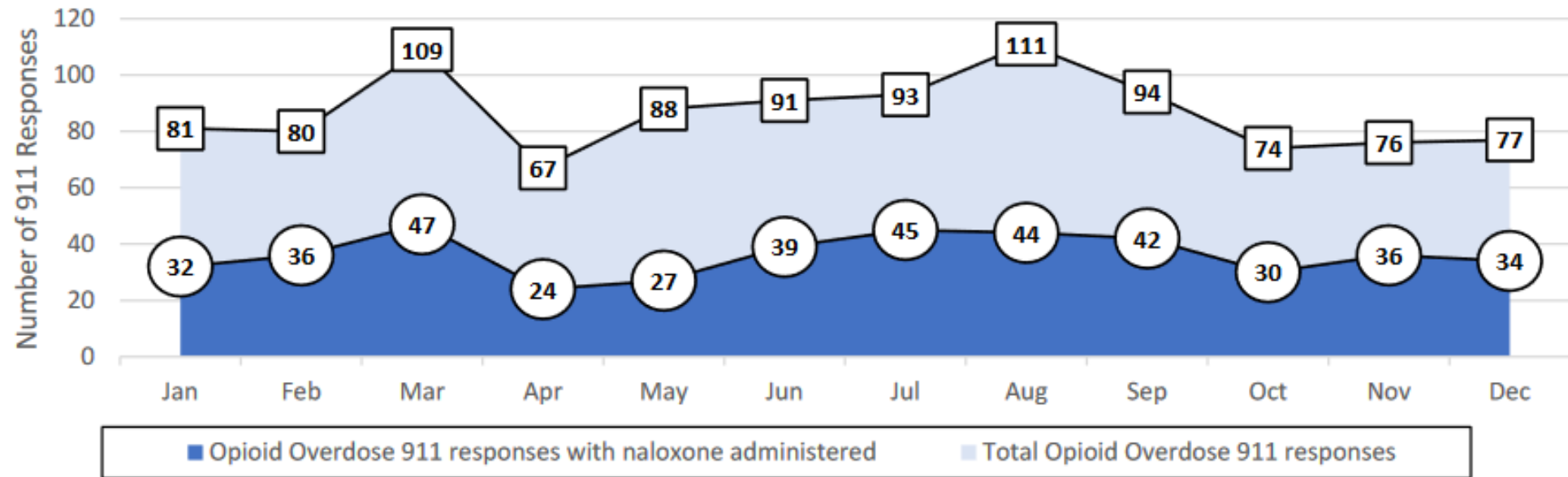


for more information about opioid prevention in Montana.



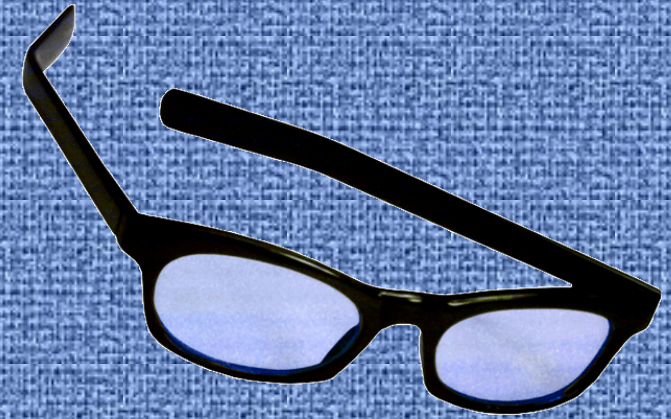
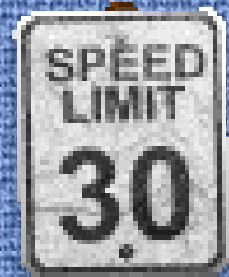
OPIOID-OVERDOSE RELATED 911 RESPONSES, 2022

Figure 1. Opioid-overdose related 911 responses with/without naloxone, Ground Transporting Agencies, 2022



WHAT DOES IT ALL





DESIGNATED
DRIVER



PRESENTATION TITLE

HARM REDUCTION



CONTRACEPTION



PERFORMANCE MEASURE

BUSINESS

NO WRONG DOOR



DEPARTMENT OF CORRECTION • CITY OF NEW YORK

SHAME MAY BE FATAL



IF YOU FEAR
YOU HAVE
CONTRACTED
A DISEASE

DON'T LET FALSE SHAME DE-
STROY HEALTH & HAPPINESS

CONSULT A REPUTABLE PHYSICIAN

MADE BY WORKS PROGRESS ADMINISTRATION - FEDERAL ART PROJECT NYC

SHAME



BY HANNAH – DOWNLOAD FROM FLICKR – 1-23-24 –
[HTTPS://WWW.FLICKR.COM/PHOTOS/74836175@N06/7142624909](https://www.flickr.com/photos/74836175@N06/7142624909)

“Shame corrodes the very part of us that believes we are capable of change.”

Brené Brown

GUILT VS. SHAME (EMOTIONS)

• Guilt

- A feeling that one has done something wrong – focused on a behavior
- Correct one's wrongdoing (apologize or go back and fix what you did wrong)
- Can be a sign of empathy

• Shame

- A feeling that one core self is wrong – focused on self (self-worth, self esteem)
- associated with issues such as depression, addiction, eating disorders, bullying, etc.
- Shame can grow in silence, secrecy and judgement

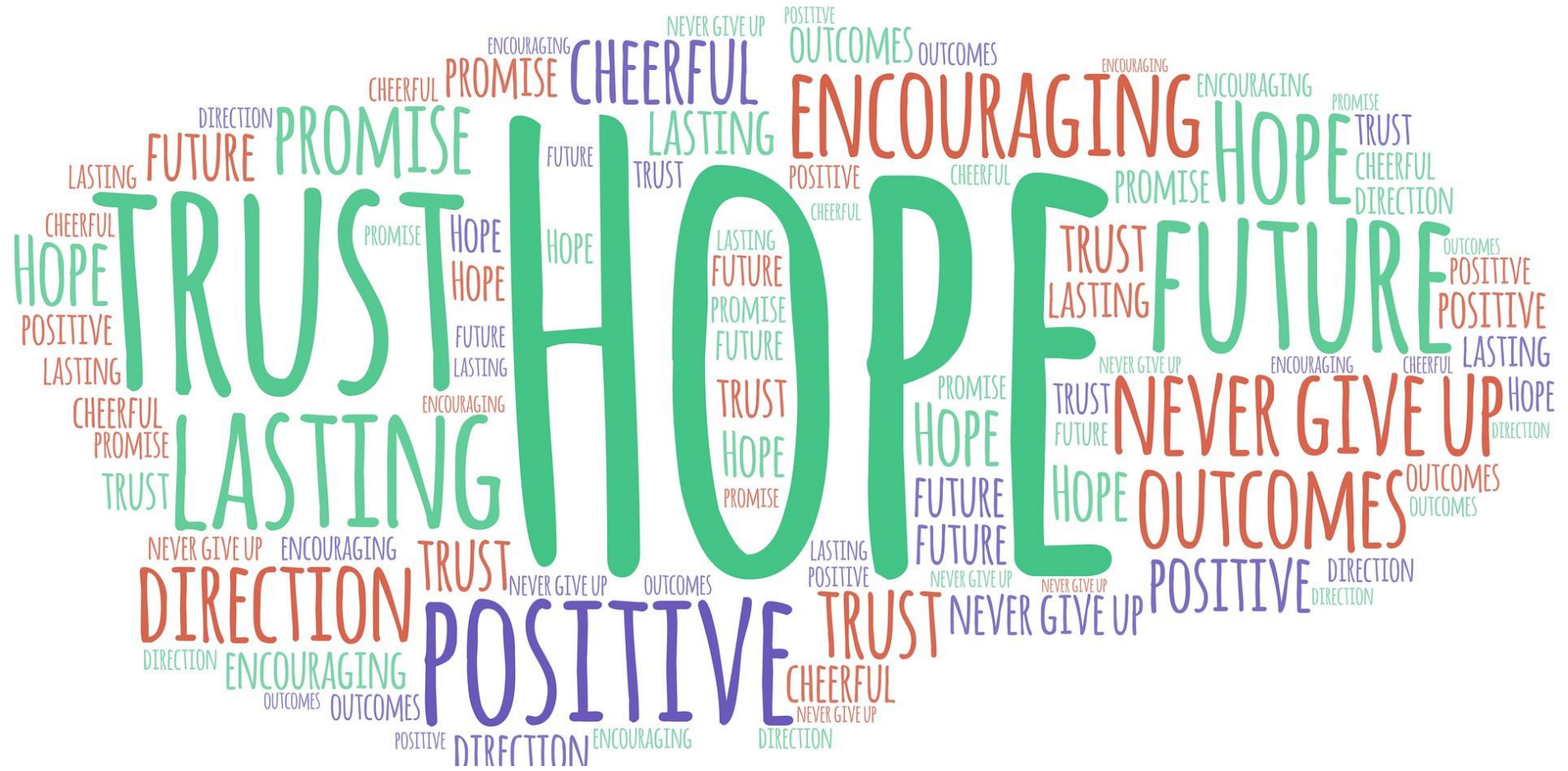
1-3/24 [HTTPS://WWW.SCIENTIFICAMERICAN.COM/ARTICLE/THE-SCIENTIFIC-UNDERPINNINGS-AND-IMPACTS-OF-SHAME/](https://www.scientificamerican.com/article/the-scientific-underpinnings-and-impacts-of-shame/)

1/3/24 LISTENING TO SHAME TED TALK - [HTTPS://WWW.YOUTUBE.COM/WATCH?V=PSN1DORYYV0](https://www.youtube.com/watch?v=PSN1DORYYV0)

CONCEPTS OF DOMAINS OF DESPAIR

SHANAHAN ET AL.

- Cognitive – “thoughts of defeat, hopelessness, guilt, worthlessness, learned helplessness, pessimish, and limited positive expectations for the future.”
- Emotional - “feelings of excessive sadness, irritability, hostility, loneliness, anhedonia and apathy”
- Behavioral - “risky, reckless, and unhealthy acts that are self-destructive and reflect limited considerations of the future.”
- Biological – “The body’s stress-reactive systems no longer functions homeostatically and show signs of dysregulation or depletion



THANK YOU

Greg Holzman

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PAUL OFFIT, MD

- There are no risk-free choices. There are just choices to take different risk

KEY SUD FACTS

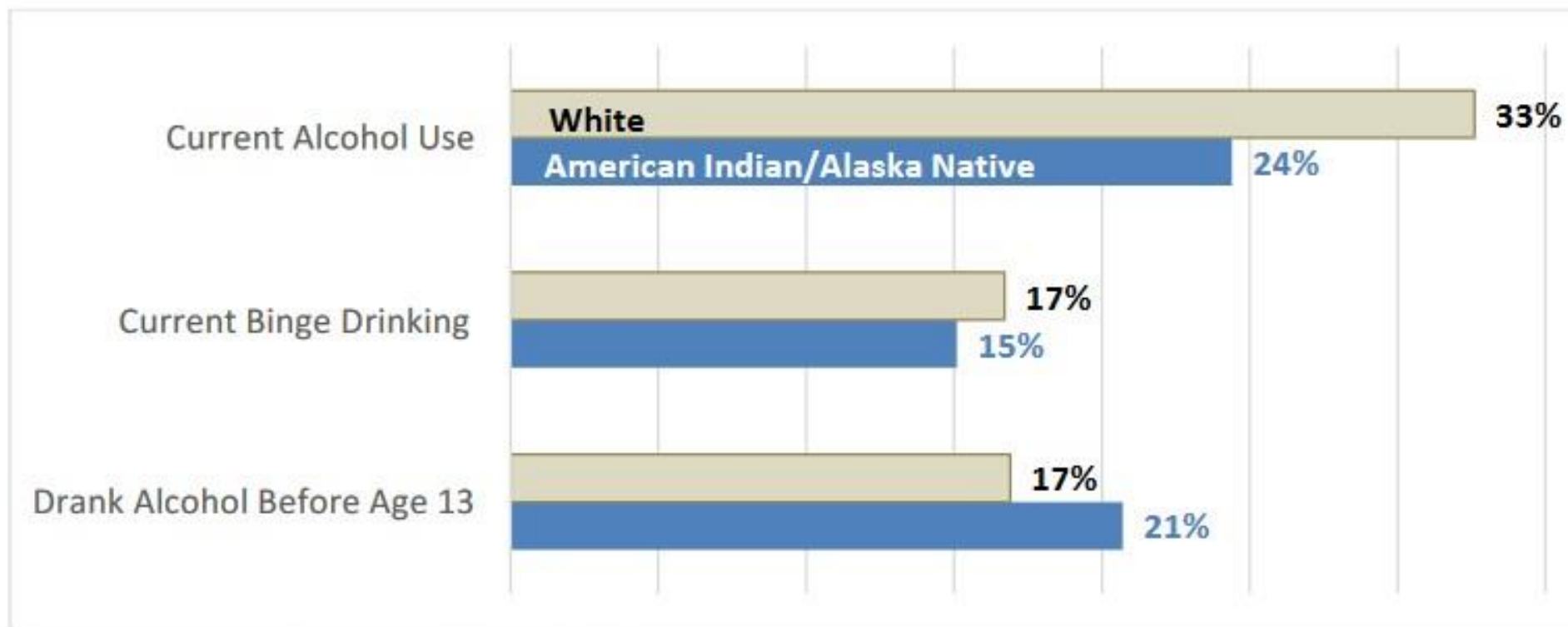
1 in 7 Americans aged 12 or older report experiencing a SUD

Some common classes of drugs associated with a SUD include, alcohol; cannabis; hallucinogens; inhalants; opioids; sedatives, hypnotics, or anxiolytics; stimulants; tobacco and (nicotine)

Coordinated care is critical to improving outcomes.

Coordinating treatment for comorbidities, including mental health conditions, is important

Figure 3. Percentage of High School Students Who Report Current Alcohol Use* and Binge Drinking**, by Race, Montana, 2021

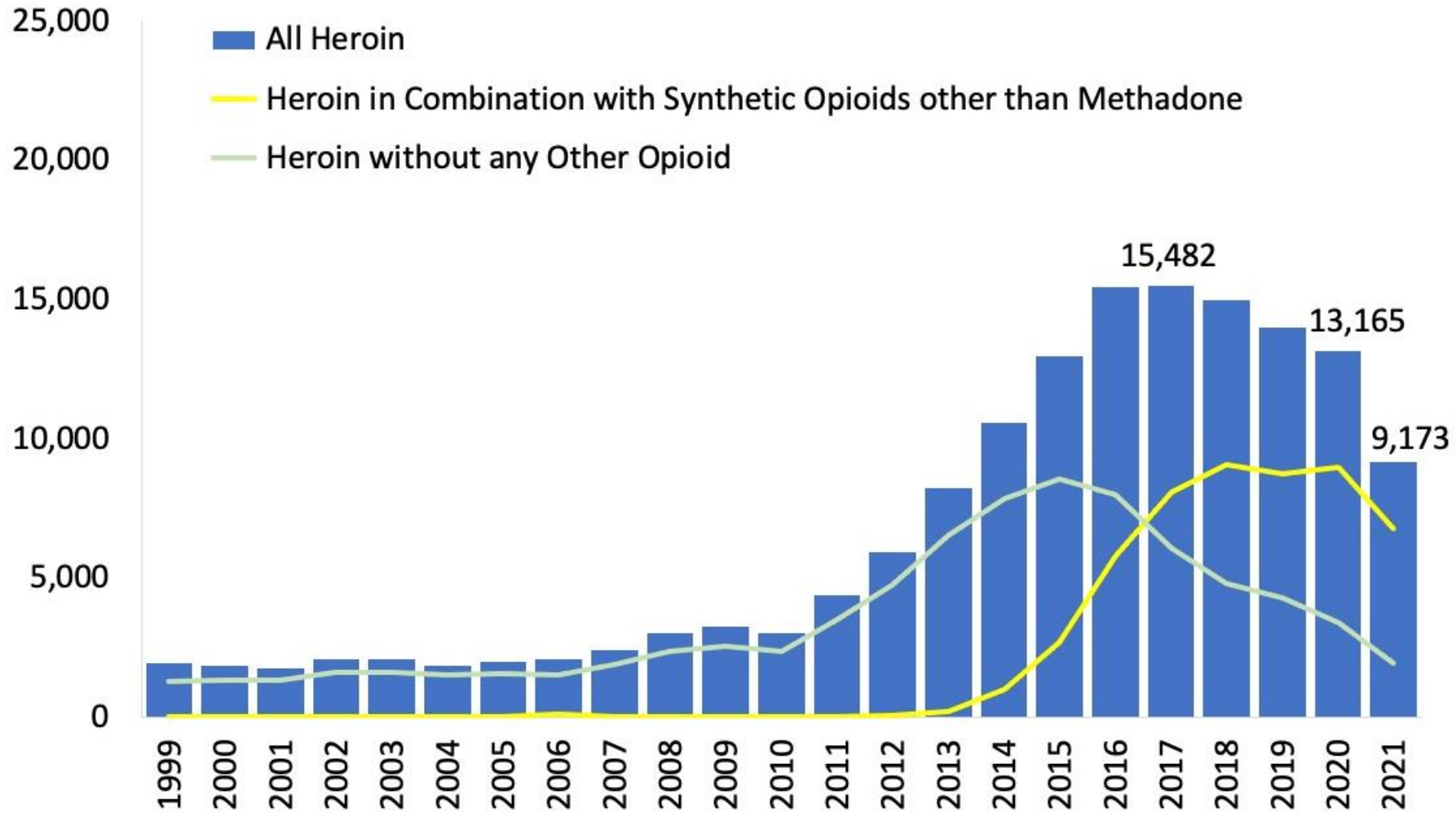


Youth Risk Behavior Surveillance Survey, 2021

*Current Alcohol Use is defined as consuming at least one drink in the last 30 days

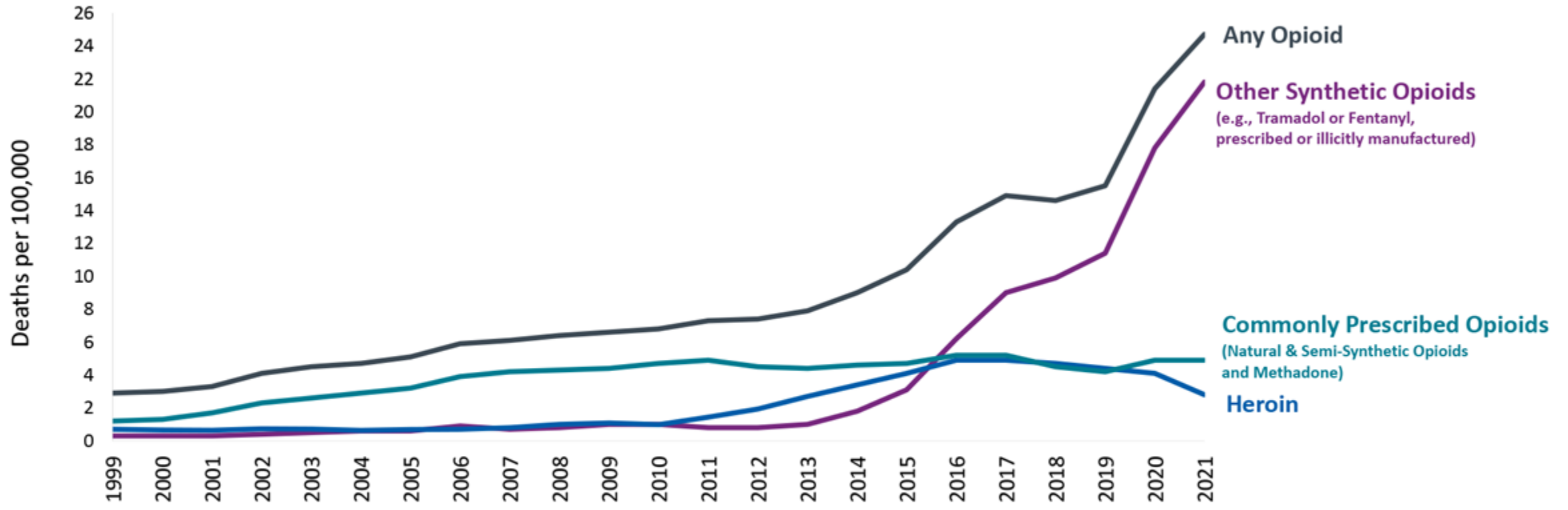
**Current Binge Drinking is defined as consuming five or more drinks during a single occasion for men or four or more drinks during a single occasion for women in the last 30 days

NATIONAL OVERDOSE DEATHS INVOLVING HEROIN*, BY OTHER OPIOID INVOLVEMENT, NUMBER AMONG ALL AGES, 1999 - 2021



*Among deaths with drug overdose as the underlying cause, the heroin category was determined by the T40.1 ICD-10 multiple cause-of-death code. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2021 on CDC WONDER Online Database, released 1/2023.

Three Waves of Opioid Overdose Deaths



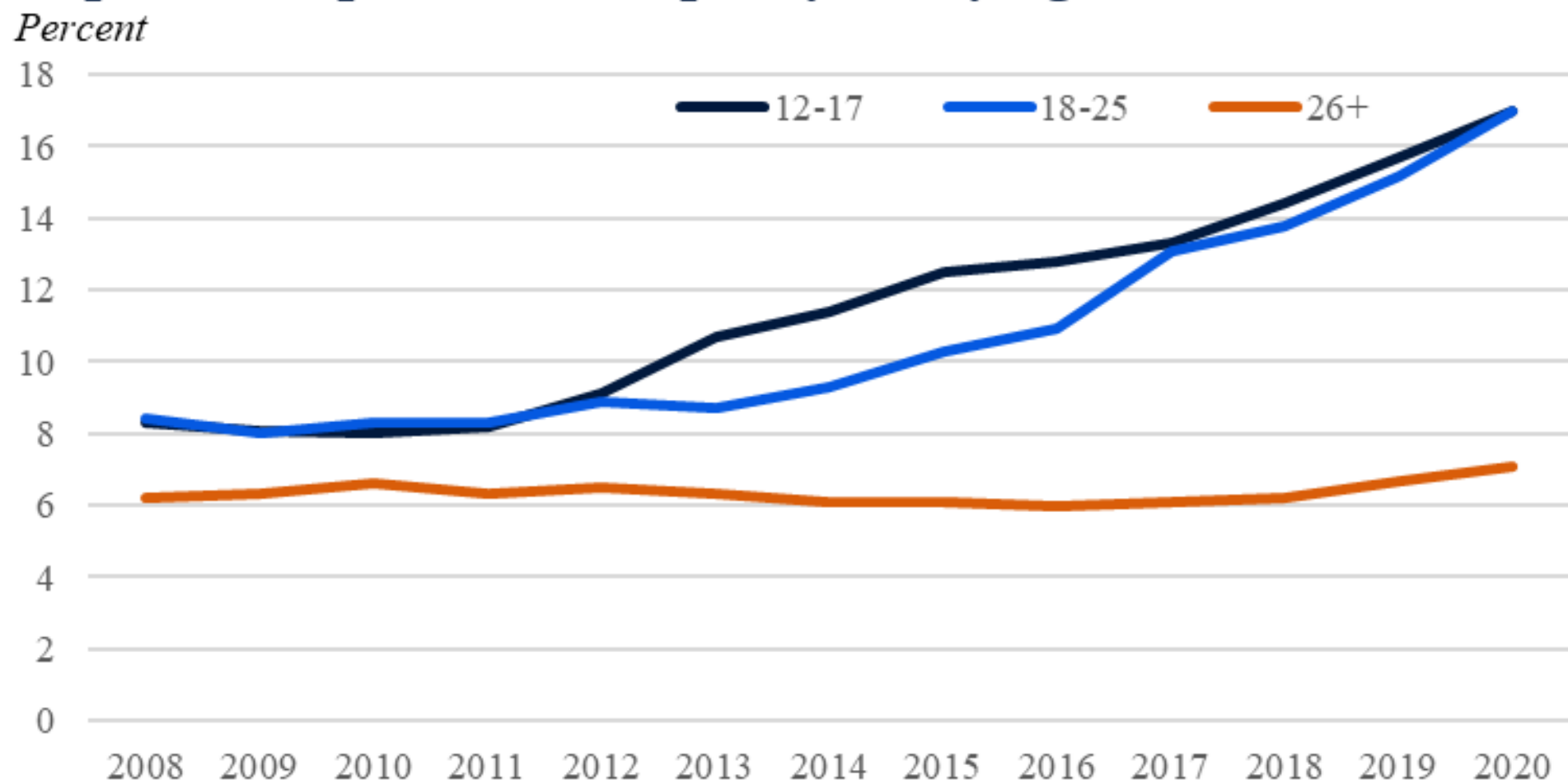
↑
Wave 1: Rise in Prescription Opioid Overdose Deaths Started in the 1990s

↑
Wave 2: Rise in Heroin Overdose Deaths Started in 2010

↑
Wave 3: Rise in Synthetic Opioid Overdose Deaths Started in 2013

SOURCE: National Vital Statistics System Mortality File.

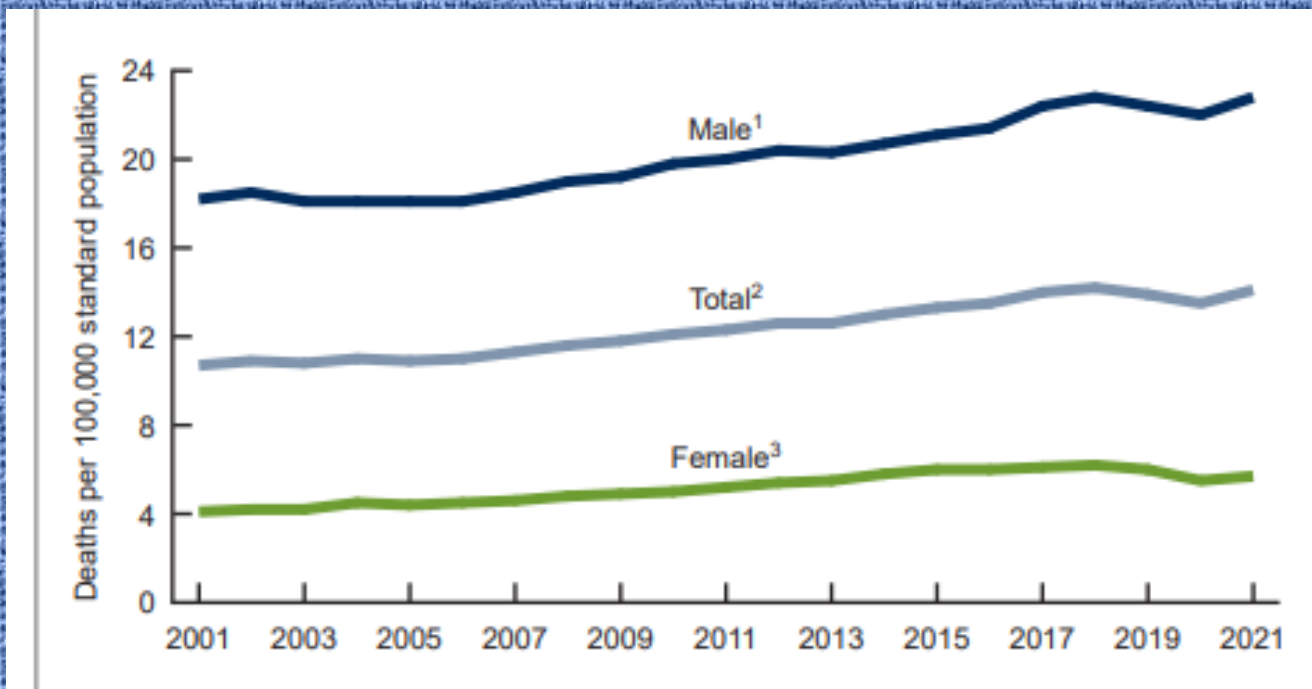
Figure 1. Percent of the population with a major depressive episode in the past year by age, 2008-2020



Source: Substance Abuse and Mental Health Services Administration

SUICIDE MORTALITY IN THE UNITED STATES, 2001 – 2021

AGE-ADJUSTED SUICIDE RATES, BY SEX: UNITED STATES, 2001 - 2021



¹No statistically significant trend from 2001 through 2006; significant increasing trend from 2006 to 2018; no statistically significant trend from 2018 through 2021, $p < 0.05$. The rate in 2021 was significantly higher than the rate in 2020, $p < 0.05$.

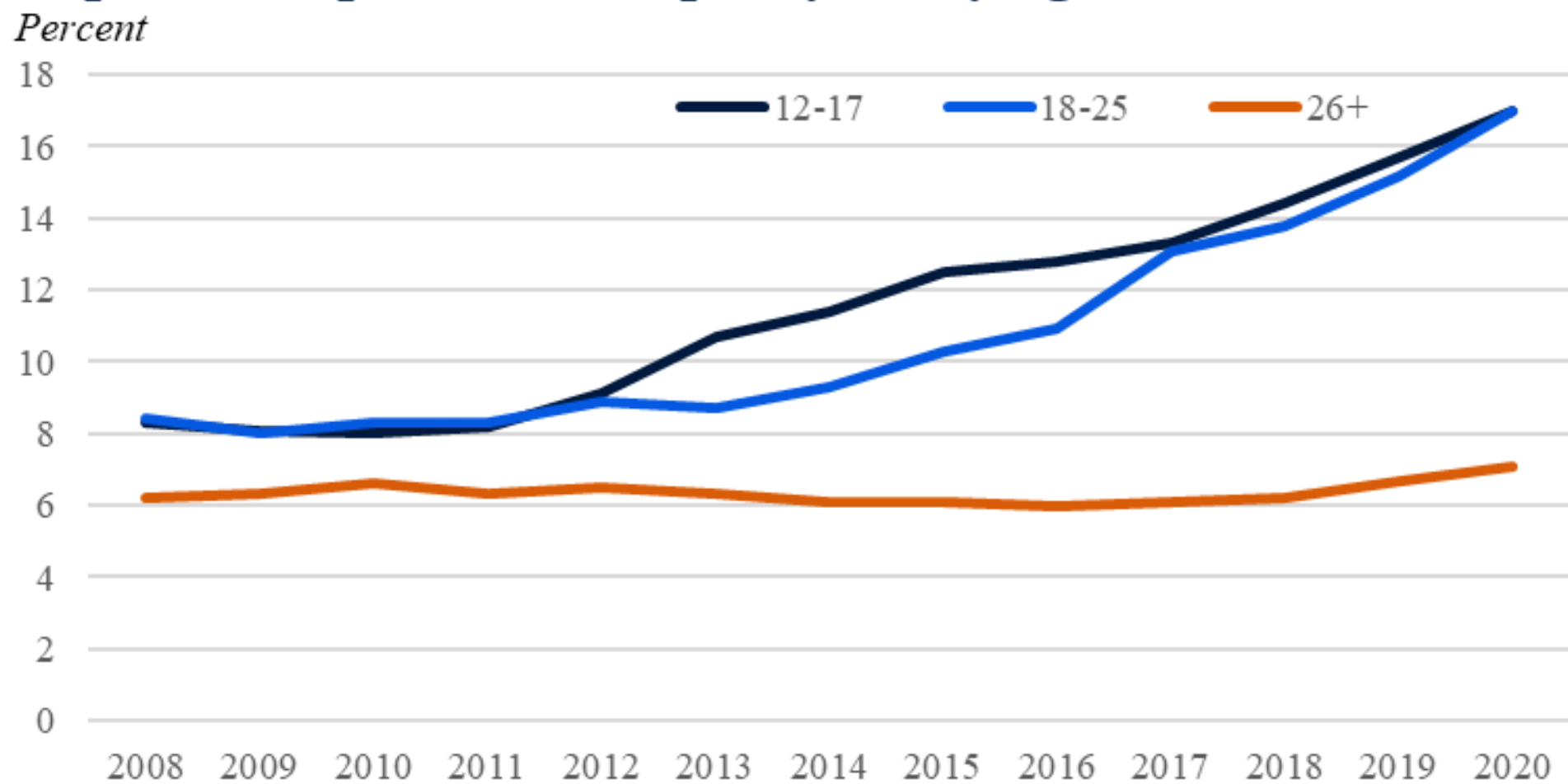
²No statistically significant trend from 2001 through 2006; significant increasing trend from 2006 to 2018, with different rates of change over time; no statistically significant trend from 2018 through 2021, $p < 0.05$. The rate in 2021 was significantly higher than the rate in 2020, $p < 0.05$.

³Significant increasing trend from 2001 to 2017; significant decreasing trend from 2017 through 2021, $p < 0.05$. The rate in 2021 was significantly higher than the rate in 2020, $p < 0.05$.

NOTES: Suicide deaths are identified using *International Classification of Diseases, 10th Revision* underlying cause-of-death codes U03, X80–X84, and Y87.0. Age-adjusted death rates are calculated using the direct method and the 2000 U.S. standard population. Access data table for Figure 1 at: <https://www.cdc.gov/nchs/data/databriefs/db464-tables.pdf#1>.

SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.

Figure 1. Percent of the population with a major depressive episode in the past year by age, 2008-2020



Source: Substance Abuse and Mental Health Services Administration



Self-esteem - Harman - Flickr.html

Our Epidemic of Loneliness and Isolation



2023

The U.S. Surgeon General's Advisory on the
Healing Effects of Social Connection and Community





Some examples that might affect one's self-esteem

- Life Stressor
 - Relationship
 - Employment
 - Disability
- Early Childhood
- Mental Illness*