

## Gavel to Gavel: Efforts to reduce prescription opioid abuse

By: Samuel P. Clancy Guest Columnist April 18, 2018



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Life expectancy in America dipped in 2016, in part, because of the national opioid epidemic. Data from the Centers for Disease Control and Prevention show that drug-overdose deaths surged nationally from 16,848 in 1999 to 63,632 in 2016.

In Oklahoma, 85 percent of the 2,500-plus unintentional prescription-drug-related overdose deaths between 2010 and 2014 involved opioids.

Oklahoma has taken several steps to build a system where controlled dangerous substances are appropriately prescribed and used to raise a pain patient's quality of life and lower abuse risks. Over the past few years, lawmakers have revised statutes and regulations governing prescriptive and dispensing authority and procedures, as well as drug schedules.

Oklahoma's Health Department published opioid prescribing guidelines for providers in 2013 and updated them in 2017. Oklahoma's Prescription Monitoring Program went live in 2015.

Practicing physicians have played an important role. Many physicians, especially pain management physicians, have dedicated significant resources to accurately determining when to initiate or continue opioids for chronic pain; initiating and maintaining proper opioid selection, dosage, duration, follow-up, and discontinuation; and continuously assessing risk and addressing harms of opioid use. Notably, many pain management physicians are using Suboxone to taper addicted patients off opioids while still managing chronic pain.

Public-private collaborations have proposed solutions. In 2013, the Prescription Drug Planning Workgroup unveiled a plan to educate the public and prescribers on opioid problems and solutions, provide secure and convenient ways to store and discard medications, and increase treatment availability. And in 2017, Oklahoma's Senate created the Oklahoma Commission on Opioid Abuse, which is led by Attorney General Mike Hunter. In January, the commission suggested policy changes and started work with lawmakers to implement legislation.

In 2016, the Prescription Drug Planning Workgroup released a progress report on the effectiveness of the 2013 plan in curtailing prescription drug abuse. This report announced that Oklahoma's comprehensive efforts made a beneficial difference in some areas: Non-medical use of painkillers decreased from 8 percent in 2009 to 5 percent in 2014, and the unintentional-prescription-opioid-overdose death rate dropped 9 percent between 2013 and 2014. Still, Oklahoma's work remains unfinished. But these data highlight the importance of public and private efforts and the need for our continued pursuit of reducing prescription opioid abuse in Oklahoma.

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