

OPIOID EPIDEMIC:
WHY NOW, WHY US, WHAT TO DO

ROBERT W. HURLEY, MD/PHD

PROFESSOR AND VICE-CHAIRMAN
DEPARTMENT OF ANESTHESIOLOGY
DIRECTOR, F&MCW COMPREHENSIVE PAIN PROGRAM
MEDICAL COLLEGE OF WISCONSIN


Thanks to:

- Advancing a Healthier Wisconsin (AHW)
- Department of Anesthesiology and Dr. Cindy Lien

Disclosures:

- The views expressed in this talk are mine and not those of F&MCW, AHW or any professional association

Opioids can be effective in some patients as a part of a comprehensive pain management plan



• Opioid overdose led to the death of 52,000 Americans in 2015

- Centers for Disease Control (2017)

HEROIN SPIKE
 HALF A MILLION AMERICANS ARE ADDICTED TO HEROIN
 Deaths from Heroin Overdose (2000-2015)

Year	Deaths
2000	~10,000
2005	~15,000
2010	~25,000
2015	52,000

WHAT HAPPENED AND WHAT TO DO?

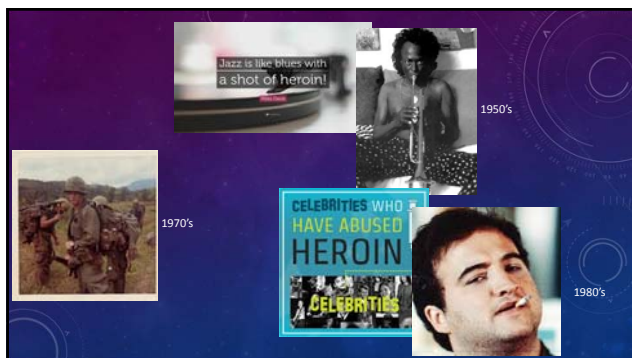
- Why now?
- Why US?
- What can we do?

1) Drug overdoses now kill more people than gun homicides and car crashes combined

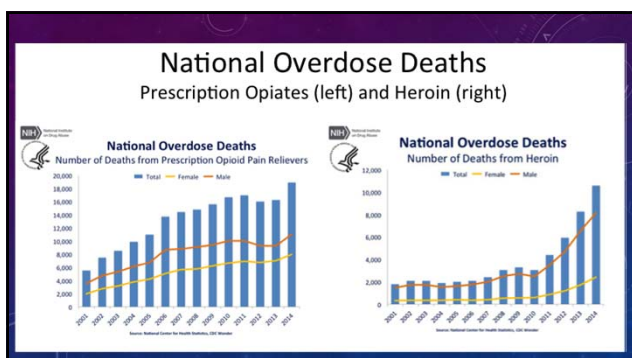
Drug overdoses killed more people in 2015 than HIV/AIDS at its 1995 peak

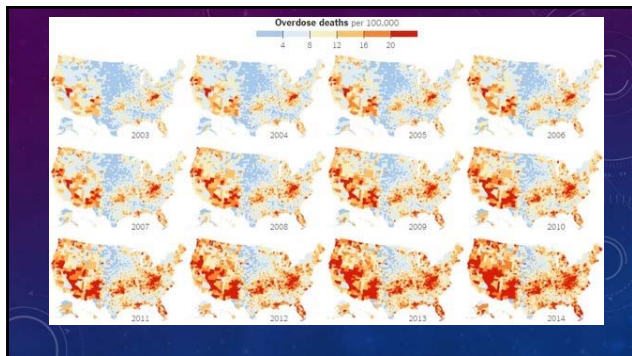
Total deaths in America by cause and year

Cause and Year	Total Deaths
Drug overdoses (2015)	52,404
HIV/AIDS (1995)	43,115
Car crashes (2015)	38,022
Gun deaths (2015)	36,252
Gun homicides (2015)	12,819









WHAT CHANGED? LESSONS LEARNED IN HINDSIGHT

1985-1995

- Medical Practice - acknowledgement of the under treatment of pain
- Availability of Medications - lack of fully effective pain medications aside from opioids
- Understanding of pain - relatively little \$ dedicated to pain research

1985-2000's

- Medical (mis-)Education - "<1% of patients receiving opioids for pain become addicted"

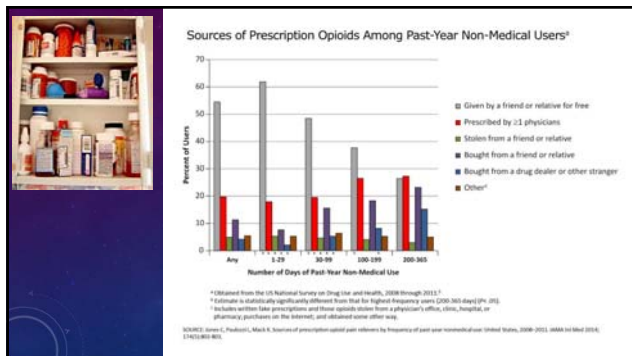
1996-2007

- Financial motive - Marketing campaign for OxyContin making false statements promoting its use
 - Manufacturer of Vicodin advertises the ease of prescribing - "no need to go to the doctor's office"

2000's

- Normalization of opioid use - Prescription opioids are "safe" because they come from a doctor

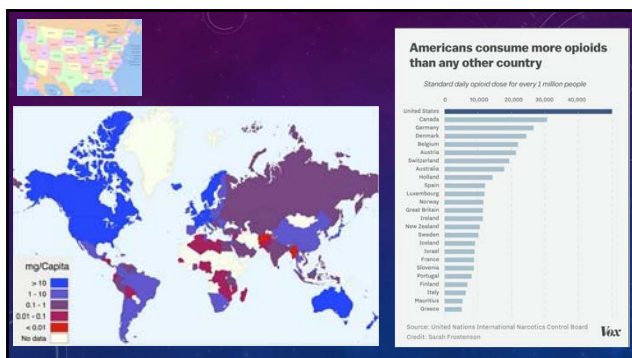


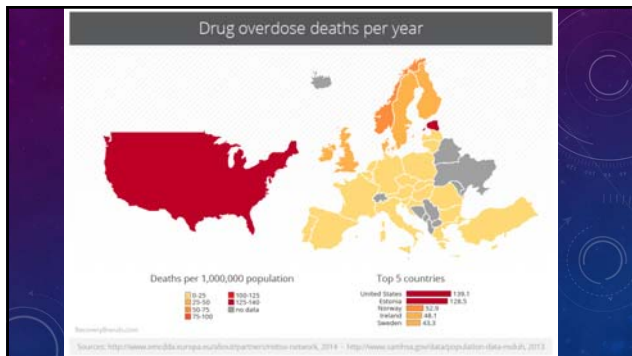


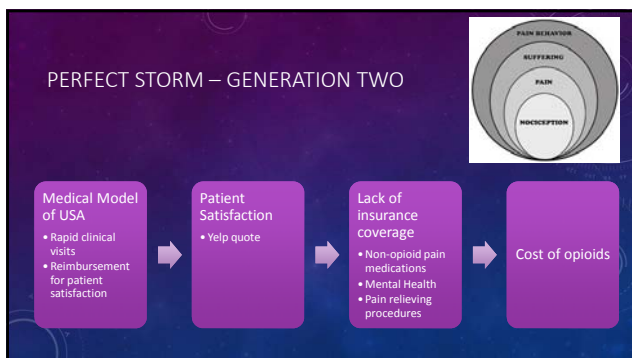
57-year-old Wisconsin mother charged with running major opioid ring from her kitchen

Bruce Vielmetti, Milwaukee Journal Sentinel | Published 5:06 a.m. CT April 3, 2017 | Updated 3 hours ago

boy," obtained 450 oxycodone tablets per month via prescriptions from two pain clinics in Milwaukee, as well as from street dealers who would sell to







CHANGE STARTS WITH US

Step 1: reduce supply

- Remove all expired unused medications (opioids, benzodiazepines, etc) from your medicine cabinet
 - <http://doseofrealitywi.gov/drug-takeback/>
- Do NOT share your prescription medications with others
- Question the clinician offering you a prescription for opioids

EDUCATION



Step 2: Update everyone's understanding

- Reform of medical, dental and nursing education
 - 30 day supply of oxycodone after tooth extraction
- Reform of lay public and patient education
 - "have you seen the ads for Lyrica (pregabalin), that drug is too risky"
 - Combat the medicalization of normal

ADVOCACY FOR INFORMATION



Step 3: Find alternatives

- Current executive branch of federal government proposed budget includes 18% reduction in funding for research
- Increased research into non-addictive opioid pain relievers and non-opioid pain relievers

HEALTH CARE REFORM



Step 4: Re-think health care priorities

- Increased access to mental health care
- Increased insurance coverage of non-opioid medication and procedural alternatives

PARTING MESSAGE



TIMING IS EVERYTHING

- Why now – 20 years of failed policy
- Why US – Availability
- What to do – Think differently
