



## **Addressing the Opioid Epidemic – How to Save a Life**

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**Presented By: Dr. Sandy Dettmann, The Dettmann Center**

In this training segment, Dr. Dettmann lectured on the genesis of the opioid epidemic, discussed medication-assisted treatment, fentanyl, and the emergence of carfentanyl, an analog of fentanyl with lethal potency. She also explained how naloxone can be used to prevent deaths, and steps that can be taken to decrease the wreckage and loss of lives.

The United States is in the midst of the largest *man-made* epidemic in its history, with drug overdoses eclipsing other causes as the leading cause of death in Americans under the age of 50. The U.S. represents only 4.4% of the world's 7.1 billion population, yet consumes more than 80% of the world's opiate supply. The narcotic painkiller hydrocodone is the most prescribed drug in the country. Deaths caused by opiate overdoses have steadily climbed in the past 20 years, with deaths from heroin overdoses skyrocketing. Heroin is increasingly being cut with cheaper, synthetic opiates such as fentanyl and carfentanyl. Users often do not know what the heroin they use has been laced with, or the potency of the drug. An equivalent amount of fentanyl is 50 times more potent than morphine. An equivalent amount of carfentanyl is at least *10,000 times* more potent than morphine, meaning that a few granules the size of grains of table salt can be lethal.

Dr. Dettmann's stated mission is to support and care for people that suffer from the disease of addiction. As supported by medical science, addiction is not the result of bad decisions made by bad people; addiction is a bad disease that afflicts any type of person, good, bad, rich, poor, young, or old. The recognition of addiction as a disease does not remove responsibility from those afflicted to treat and control their disease. Prevention and treatment of people suffering from this disease, instead of shaming, punishing, and marginalizing those with the disease, should be the goal of the health care and social communities.

The opioid epidemic—declared a public health emergency by the President in 2017—is a relatively recent phenomenon. While addiction, like alcoholism, has been with us for millennium, overprescribing of narcotics for pain in recent decades, and the widespread availability of prescription narcotics, represents one of the causes of the current epidemic. Dr. Dettmann suggested that the marketing practices of big pharmaceutical companies duped many doctors into prescribing narcotics too much and too often. Research indicates that a large percentage of heroin addicts began their addiction using prescription narcotics. Frighteningly, age 12 is the average age that an illicit drug is first used. Other factors, including the influx and illegal distribution of large quantities of dangerous synthetic narcotics such as fentanyl, have worsened the scope of the opioid epidemic.

Police and government units are working to curtail supply and availability of opioids, but overall it is clear that the response of American society in general to this crisis is not working. Dr. Dettmann advocates for more availability and more effective treatment of those afflicted with the disease of addiction to prevent further death and loss. Recommended is use of Medication Assisted Treatment (MAT). If carefully supervised, research has shown that long-term use of



medications such as naltrexone, methadone, and naloxone, in combination with counseling and behavioral therapies, provide a whole-patient approach to the treatment of substance use disorders that has been successful.

She stresses that MAT treatment alone is not the cure for addiction. Addicts must learn to cope, “live life on life’s terms”, attend individual and/or group therapy, participate in 12-step group meetings, and stay engaged and invested in their treatment.

Dr. Dettmann also recommends other actions, policies, and responses to avoid or treat addiction, in particular with respect to young people. They include:

- Decrease opioid prescribing
- Primary physicians and providers should make early referrals to pain management specialists
- Increase the availability of the lifesaving opioid overdose reversal agent, naloxone
- Increase access to effective, evidence-based treatment
- Create reasonable payment structures for treatment
- Parents increase the *quantity* of time spent with their children