

#### THE OPIOID EPIDEMIC, NEUROBIOLOGICAL MODEL OF ADDICTION, AND TREATMENT APPROACHES

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## My Background

#### **Emergency physician and rural health researcher**



On my drive between Fort Defiance and ABQ

#### Associate Professor

- Emergency Medicine
- Psychiatry and Behavioral Sciences

#### Researcher

- Behavioral health substance use, mental health
- Rural health outcomes

#### Director of NM Bridge (BHSD)

Support rural ERs in addressing opioid use disorder



## Today's Agenda

Three waves of the opioid crisis

- Prescription opioids OxyContin
- Heroin
- Synthetic opioids Fentanyl

The neurobiological model of addiction

Current treatment approaches

Impact of fentanyl



#### National Opioid Crisis

 Opioid use is common and is the leading cause of accidental death

•Over **1** million Americans have died from opioids since 2019

Illegally manufactured (synthetic)
Fentanyl is particularly deadly

#### Figure 2. U.S. Overdose Deaths\*, Select Drugs or Drug Categories, 1999-2022



National Institute on Drug Abuse



## New Mexico's Opioid Crisis

- Historic context over 50 years
  - Particularly in Española and surrounding communities
- New Mexico has the 6<sup>th</sup> highest drugoverdose rate in the nation (2021)
- Fentanyl deaths surged in 2019
- Stabilizing overdose rates in 2022



\*2022 rates for New Mexico were calculated using 2021 population estimates. Avoid drawing conclusions or comparing 2022 rates to past years

These data were analyzed and prepared by NMDOH Substance Use Epidemiology Section. For any questions regarding this data, please email malinda.gowin@doh.nm.gov

## **Definitions: Opioids**

Opioids are a class of drug found in the opium poppy plant

The opioid drug class contain both legal prescription pain medications and illegal street drugs

 However, many legal prescription pain medications (e.g., fentanyl), can be created illegally in drug labs and sold as street drugs

Types of opioids:

Туре	Origin	Examples
Natural opiates	Derived from opium poppy plants	Morphine, Codeine, Heroin
Semi-synthetic opioids	Made in labs, from poppy plant, potent	Oxycodone, hydrocodone
Synthetic opioids	Made in labs, from chemicals, very potent	Fentanyl



#### **Three Waves**

First Wave – 1990s + OxyContin

 Insufficient regulation of the pharmaceutical and health care industries facilitated a profit-driven quadrupling of opioid prescribing

Second Wave - 2010 + Heroin

• Heroin as a substitute for pills

Third Wave – 2013 + Fentanyl

Illegally manufactured fentanyl

Fourth Wave? – now

Fentanyl + stimulants (cocaine, meth)



This rise in opioid overdose deaths is shown in three distinct waves.



## What is addiction?

**Substance use disorder**: A diagnostic term which refers to recurrent use of drugs that causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.

Addiction: A term used to indicate the <u>most severe</u>, <u>chronic stage of</u> <u>substance-use disorder</u>, in which there is a substantial loss of self-control, as indicated by compulsive drug taking despite the desire to stop taking the drug.



## From "addict" to "brain disease"

• Historically, the **stigma of addiction** is driven by the perception that addiction is related to character flaws and ethical shortcomings.

• Advancements in scientific research have proven this **historical perspective to be categorically false** and <u>potentially harmful</u> by fostering negative attitudes toward those seeking help for addictive disorders.

Neurobiological Framework

Addict

**Brain Disease** 

 Contemporary models of addiction utilize a neurobiological framework for the onset, development, and maintenance of an addiction.



## Neurobiological framework

- It defines addiction as a <u>chronic and relapsing</u> <u>disorder</u> marked by specific neuroadaptations predisposing an individual to pursue substances regardless of potential consequences
- These neuroadaptations occur in the 3 distinct neurobiological stages
  - Intoxication/binge
  - Withdrawal/negative affect
  - Preoccupation/anticipation





#### Three stages explained





#### These are linked to parts of the brain

**Executive functioning** – shifting balance between this circuit and the basal ganglia/amygdala results in compulsive drug seeking behavior and reduced impulse control

Binge/ Intoxication BASAL **Reward center** – drugs overstimulate this circuit GANGLIA and cause euphoria, but with repeated exposure the circuit adapts and makes it hard to feel pleasure from anything else besides the drug PREFRONTAL CORTEX EXTENDED AMYGDALA **Emotion center** – involved in stress, feelings of unease and irritability – circuit becomes increasingly sensitive, thus people use the drug to avoid discomfort rather than to get high



#### Medications for Opioid Use Disorder (MOUD)

## Using this model to inform treatment

- Medical treatment can help to restore healthy function in the affected brain circuitry – and reduce addiction behaviors
- There are FDA-approved medications to treat OUD which can be used with behavioral health counseling
  - Methadone, Buprenorphine, and Naltrexone





# Medications for Opioid Use Disorder (MOUD) – also known as MAT

MOUD	Prescribed	Mortality Benefit	Mechanism	Effective
Methadone	At a clinic	> 50% reduction	Agonist	Yes
Buprenorphine	Any physician	> 50% reduction	Partial Agonist	Yes
Naltrexone	Any physician	Insufficient data	Antagonist	Yes

- All three reduce OUD but only methadone and buprenorphine reduce mortality
  - When taken as prescribed, <u>neither produce a euphoric high</u> and are equally effective
- Patients on MOUD are less likely to overdose, die, use illicit opioids, develop Hepatitis C or HIV, suffer other infections complications, have contact with the criminal justice system
- Studies show that diversion (use without a prescription) is primarily for controlling withdrawal



## Ideally, SUD is integrated into medical treatment

A few highlighted ways UNM is doing this -

- MOUD in the inpatient setting
  - New addiction medicine consult service
- MOUD treatment with at-risk populations
  - ED-based MOUD (NM Bridge)
  - Metropolitan Detention Center
  - Street Medicine
- Crisis Triage Center
  - Connection to SUD treatment
- Certified Community Behavioral Health Clinic (CCBHC)
  - In process of certification, Jan 2025
- NM Poison Center
  - Statewide service offering 24/7 addiction medicine consultation

