A Metaphorical Analysis of the Prescription Drug Problem in the United States and Approaches to Prevention

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Why Metaphors?

- A metaphor is a figure of speech that makes concisely an implied comparison between two unlike things that actually have something important in common, e.g., “the world is a stage.”
- We understand our world differently depending on the metaphors we use.
- Metaphors are not neutral: they can help or hurt a situation.
- An oft-repeated “dominant metaphor” can control the public discourse about an issue.
Outline

• The War on Drugs
• The Pendulum of opioid policy
• The Balance between pain and overdoses
• Pandora’s Box of opioid effects
• Doctor Shopping
• Squeezing the Balloon
• Snowball of abuse
• Road map for policy
War on Drugs: The dominant drug metaphor of the Twentieth Century
Pendulum of Opioid Analgesic Policy

See also: “Sea change”
Opioid analgesic, heroin, and cocaine death rates, U.S., 1999-2009

Number of deaths

Opioid analgesic
Cocaine
Heroin

National Vital Statistics System
Balance of opioids

Untreated Pain

Overdose Deaths
Balance of opioids

Social Costs

Social Benefits
Pandora’s Box of Opioid Effects
Non-overdose effects of widespread opioid analgesic use

- Mental impairment → other types of unintentional injuries
  - Falls and fractures among elderly
  - Motor vehicle crashes involving “drugged driving”
- Substance abuse → crime and interpersonal violence
- Intravenous use of drugs → infections
  - HIV or hepatitis transmission related to injection of dissolved tablets
- Use during pregnancy → reproductive health effects
  - Possible congenital defects
  - Newborn withdrawal syndrome
Doctor Shopping and Pill Mills
Cumulative Number of States Authorizing Selected Prescription Drug Abuse Related Laws, 1970-2010*

*Laws enacted as of 8/31/2010.
Squeezing the balloon

-- Alternative sedatives for benzodiazepines

-- Roxicodone for OxyContin

-- Heroin for opioids

-- Oxymorphone for OxyContin
Changes in sedative prescription counts in New York State when benzodiazepines were added to triplicate program 1/1/1989

Sales of popular extended-release brand-name opioid analgesics, 2006-2011

Source: IMS Health data obtained at www.drugs.com/stats
The Snowball of Opioid Analgesic Abuse

Users become tolerant and require higher doses. Users eventually can’t afford daily doses. Users obtain drugs to sell to finance their drugs. Number of users increases....
Choosing Metaphors that Will Support Prevention Efforts

- Metaphors for interventions to avoid like the plague:
  - “War on drugs”: punitive, narrow response
  - “Maintaining Balance”: implies that some deaths are necessary
  - “Squeezing the balloon”: ignores progress; a zero sum game

- Metaphors for the problem to have in your back pocket:
  - Snowball: self-reinforcing nature of problem
  - Pandora’s box
    - Accurately portrays the difficulty of undoing the damage
    - Multiple, unanticipated bad outcomes of scientific development
    - There was one thing left in the box: hope
Policy Road Map for Prescription Drug Abuse
PRESCRIPTION DRUGS

Strategies and points of intervention for preventing misuse, abuse, and overdose, while safeguarding access to treatment.

PILL MILLS
Interventions

PROBLEM PRESCRIBING
Interventions

GENERAL PRESCRIBING
Interventions

HOSPITALS / EMERGENCY DEPARTMENTS
Interventions

PHARMACIES
Interventions

INSURERS / PBM
Interventions

PEOPLE AT HIGH RISK FOR OVERDOSE
Interventions

GENERAL PATIENTS / PUBLIC
Interventions

NOTE: What is presented here are the priority strategies that are likely to have the greatest impact. This is not an exhaustive list.
CDC Policy Recommendations

- Prescription Drug Monitoring Programs (PDMPs)
- Patient Review & Restriction Programs
- Laws/Regulations/Policies
- Insurers & Pharmacy Benefit Managers (PBM) mechanisms
- Clinical Guidelines
- Improve Access to Substance Abuse Treatment
Maximize Prescription Drug Monitoring Programs (PDMPs)

- **Focus PDMPs**
  - On patients at highest risk of abuse and overdose
  - On prescribers who clearly deviate from accepted medical practice

- **Implement PDMP Best Practices**
  - Allow access to prescribers and dispensers
  - Allow access to regulatory boards, state Medicaid and public health agencies, Medical Examiners, and law enforcement (under appropriate circumstances)
  - Provide real-time data and access
  - Share data with other states (interoperability)
  - Integrate with other health information technology to improve use among health care providers
  - Have ability to send unsolicited reports
Patient Review and Restriction Programs (aka “Lock-In” Programs)

- Applies to patients with inappropriate use of controlled substances
- 1 prescriber and 1 pharmacy for controlled substances
- Improve coordination of care and ensure appropriate access for patients at high risk for overdose
- Evaluations show cost savings as well as reductions in ED visits and numbers of providers and pharmacies.
Some states have enacted laws and policies aimed at reducing diversion, abuse, and overdose.

Policies can strengthen health care provider accountability.

Safeguard access to treatment when implementing policies.

Rigorous evaluations to determine effectiveness and identify model aspects.
Insurer/Pharmacy Benefit Manager (PBM) Mechanisms

- Reimbursement incentives/disincentives
- Formulary development
- Quantity limits
- Step therapies/Prior Authorization
- Real-time claims analysis
- Retrospective claims review programs
Clinical Guidelines

- Improve prescribing and treatment
- Basis for standard of accepted medical practice for purposes of licensure board actions
- Several consensus guidelines available
Common themes among current consensus guidelines

- Screen and monitor patients for substance abuse and mental health problems
- Prescribe opioids only when other treatments have not been effective for pain
- Prescribe only quantity needed based on expected length of pain
- Use patient-provider agreements combined with urine drug tests for long-term users
- Teach patients how to safely use, store and dispose of medications
- Avoid co-prescribing opioids and benzodiazepines (if possible)
- Use PDMPs to identify patients improperly using opioids and other controlled prescription drugs
Improve Access to Substance Abuse Treatment

- Access to substance abuse treatment is critical
- Effective, accessible treatment programs can reduce abuse and overdose among people struggling with dependence and addiction
- States should plan for increased demand, including access to medication assisted therapies like buprenorphine and methadone
The findings and conclusions in this report are those of the author and do not necessarily represent the views of the Centers for Disease Control and Prevention.