

Understanding Addiction: The Opiate Crisis Among Us and Treatment Options

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Objectives

- Provide Education about Addiction, The Disease Concept and Bio/Psycho/Social Model
- Educate about Relapse, Progression and Outcomes
- Discuss Current Addiction Trends (Specific to Opiate Epidemic and Overdose Crisis in PA)
- Introduce treatment Options: Collective Approach
- Recovery Process and Success in Sobriety
- Available Resources in our System



Addiction as a Disease

Addiction is recognized as a disease by the American Medical Association (AMA) and is defined as:

A mental obsession and pre-occupation that drives compulsive behaviors despite negative consequences



Criteria for Addiction

Abuse vs. Dependence

- Abuse is defined as using substances more often & frequently than recommended, leading to minor consequences as a result.
- Once Abuse crosses over into Chemical Dependency, there is criteria used to diagnose Addiction.



Criteria for Addiction (cont)

Bio/Psycho/Social Model (DSM V)

Alcohol & Substance Use Disorders

- Chemical Dependence and Physical Withdrawal
- Several attempts to cut down, control and/or stop using that have been unsuccessful
- Progression Occurs: Increase in frequency, tolerance, method and amount



Criteria for Addiction (cont.)

- Irrational and/or Distorted perceptions/beliefs, negative thought patterns, unhealthy behaviors and change in personality and affect
- Consequences with self, job, finances, legals, ect.
- Family Dysfunction and social/relationship discord
- Symptoms with self, personality & life in addition to the addictive use.



Misconceptions of Addiction

- Self will and intention should allow people to stop addiction “they can stop on their own”
- Addicts are hiding use and behaviors because of deviance and because they are bad people
- Love should be powerful enough to produce change



Misconceptions of Addiction (cont)

- Family doesn't need to do anything, the addict is the one that needs help and has to change
- We can force and/or control someone to change
- They did this to themselves, they deserve it



Addicts' Point of View

- Shame due to behaviors and progression
- Fear of change and being honest with others
- Guilt over impact of their use and their consequences
- Overwhelming efforts to hide/mask addiction and behaviors



Addicts' Point of View (cont)

- Suffering, mentally, physically and emotionally
- Denial – struggle to see the impact of their use and behavior while their still stuck in the cycle of addiction
- Resistance/Difficulty with change due to all of the above



Facts About Addiction

- Addiction is not something people consciously choose to have happen to them, it's a developing Brain Disorder
- There is no cure for addiction, only remission through treatment and continued support
- Relapse is a major problem for people trying to recover, but not a requirement for everyone
- Recovery is a process that begins in treatment and continues over time through continued care and consistent change



Facts About Addiction (cont)

- It is a progressive and fatal illness which, if goes untreated will result in jail, institution and/or death
- Huge epidemic among our population, now primarily affecting young adults ages 18-29 and is moving towards a National Crisis due to overdose rates
- Need for support, funding and resources to allow for treatment and help to intervene



Facts about Relapse

- Define Criteria for relapse (6 months remission).
- Progression of thought impairment, emotional instability, change in behavior, poor decision making and loss of control that leads back to drug/alcohol use.
- Usually occurs when recovering individual stops working on themselves and engaging in 12 step program/self care.
- Leads to increased tolerance, worse consequences, further dysfunction with self/families and adds to underlying core issues/trauma.
- Important to intervene ASAP with treatment and consider long term approach.



Current Addiction Trends

- Opiate Epidemic Among Us:
 - Narcotic Medication Movement
 - Powerful effects of the Opiate
 - Prescription Versus Street Usage
 - Progression from Miligram of Pills to Heroin (4 out of 5 heroin users began with pills)
 - Cross Addiction and Tolerance
 - Withdrawal as a Motivating Factor (begins as early as 4-6 hours)
 - Invincibility + Desperation + Distorted reality



American Society of Addiction Medicine

- Of the 21.5 million Americans 12 or older that had a Substance Use Disorder (SUD) in 2014, 1.9 million had a SUD involving prescription pain relievers and 586,000 had a SUD involving heroin
- Drug overdose is the leading cause of accidental death in the US, with 47,055 lethal drug overdoses in 2014.
- Opioid addiction is driving this epidemic, with 18,893 overdose deaths related to prescription pain relievers, and 10,574 overdose deaths related to heroin
- In 2012, 259 million prescriptions were written for opioids, which is more than enough to give every American adult their own bottle of pills.



National Center of Addiction & Substance Abuse Facts:

- Each year federal, state and local governments spend close to \$500 billion on addiction and substance abuse, but for every dollar that federal and state governments spend, only 2 cents goes to prevention and treatment
- A report in 2012 by The National Center on Addiction and Substance Abuse revealed that medical schools devoted little time to teaching addiction medicine — only a few hours over the course of four years. Since then, the number of Americans overdosing from prescribed opioids has surpassed 14,000 per year, quadrupling from 1999 to 2014.



Opiate Overdose Crisis

- One person dies every 19 minutes of an opiate overdose.
- PA is among the 10 states with the highest opiate use and overdose rates, PA also has the 14th highest Drug overdose mortality rate in the US
- More than 90% of people with a substance problem began smoking, drinking or using other drugs before age 18, yet less money is invested in educated this generation on addiction issues



Opiate Overdose Crisis

- Delaware County is within the 10 highest counties for opiate overdoses
- In Delaware County, someone overdoses every 7 minutes
- Roughly 1 in 3 people who die from suicide are under the influence of drugs, typically opiates.
- Healthcare costs from Opiate Abuse in 2014 averaged \$874 Million Dollars
- Pharmaceuticals are the most common cause of overdose (in 2010 57.7%)



Treatment Options/Getting HELP

LEVELS OF CARE:

- Detox/Medical Treatment
- Inpatient Rehab (Dual Dx)
- Partial Hospital Treatment
- Intensive Outpatient Program (IOP)
- Outpatient Counseling
- AA/NA 12 step meetings, sponsorship, home group, etc.
- Mental Health Services are available as well
- MAT Services



Recommendations for Best Outcomes

- Begin with Detoxification
 - to ensure safety in medical stabilization
- Followed by an inpatient treatment stay
 - to gain insight & understanding into addiction as a disease
 - Develop Healthy Peer relationships with people motivated for change



Recommendations for Best Outcomes (cont)

- Engage in therapy
 - Address underlying issues/trauma related to addictive use
 - Address behaviors related to addiction
 - Involve family to address any dysfunction
 - Address mental health concerns
 - Assess and recommend aftercare that fits patient needs for best outcomes in sobriety which promote positive change.



Progression of Change

- **Pretreatment** – recognition of addiction (normally through consequences and lack of resources to keep going)
- **Stabilization** – regain control of thought & emotional processes, judgement and behavior
- **Early recovery** – acceptance of the disease and learning to function w/o substances
- **Middle Recovery** – Developing a normal balanced lifestyle
- **Late Recovery** – Development of self esteem, spiritual growth, healthy intimacy and meaningful living
- **Maintenance** – Staying sober & productive in life



Steps to Recovery

- Stabilize in all aspects through treatment directions.
- Continue to work a 12 step program of recovery, including sponsor relationship, home group, service/commitments.
- Practice daily self care, stress management and asking for help. Maintain healthy supportive relationships.
- Remain abstinent from all chemicals and continue to make necessary changes in attitude, behavior, thinking and defense mechanisms that create positive growth and change.
- Life long process of self inventory, reflection, acceptance and the willingness to work on self improvement.



Collaborative Approach

- MLHS creating new avenues for overall Behavioral Health, Education and Support & Connection
- Working together with: Social Workers, Therapists, Medical professionals, EMS and First Responders
- Involving the schools and community to assist with education and prevention for teens/young adults
- Decrease punitive action/mandate treatment
- Increase awareness, raise funds and work together with the recovering communities



Outcomes with a Collaborative Approach

- Decrease the amount of narcotic prescriptions used to treat pain with alternative options
- Intervene on signs/sx of addiction to minimize access to prescriptions, ER visits, Doctor Shopping
- Identify and Address concerns versus ignore them
- Decrease wait times for tx, and increase resources for people to access care and stay in treatment
- Intervene early on future generations to help prevent progression with a national crisis.
- Increase Compassion as Providers



Medication Assisted Treatment Options

- Naloxone (Narcan) is saving lives as it reverses the effects of Opiate Overdose instantly
- Vivatrol – Anti-craving, Blocker for Opiates lasting 30 days
- Suboxone - is a prescription medication that combines Buprenorphine and naloxone. It's used to treat opioid addiction.
- Changes in the way we treat addiction in 2016 are centered around the Opiate Crisis and MAT



How to get Help: Mirmont ... A Few Facts

- **24/7 ADMISSIONS ADULTS 18 AND OLDER**
- Dual Diagnosis drug and alcohol inpatient facility
- Holistic approach to healing (acupuncture, yoga, pain management, Qi Gong)
- Treatment of trauma
- Individual, group, peer and family therapy
- Specialized program for First Responders (VIPER)
- Relapse Prevention Program



Mirmont Facts (cont)

- Alumni Program
- Community Approach to change
- All levels of care and continued aftercare
- Family Program
- Member of Main Line Health System
- Several convenient locations for Outpatient Treatment:
 - Drexel Hill, Exton, Lima (main campus)



A Few Facts about OP...

- Programs available (Broomall & Exton)
 - Day time and Evening IOP (9 hours per week)
 - Day time and Evening OP (1 hour per week)
 - DUI/Early intervention Group
 - MAT group program
 - Adolescent IOP/OP and Family Group
- Consistent and in alignment to Mirmont's holistic approach to treating addiction, trauma and relapse issues.

Resources

- Staying Sober by Terrence Gorski
- www.overdosefreepa.edu
- www.nationaldrugabuse.org
- The National Center on Addiction and Substance Abuse
- American Society of Addiction Medicine



Thank You!

For Help or Questions:

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