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Learning Objectives



By the end of this session, participants should be able to:

- Review the connection between mental health disorders and
  OLID.
- Explain the relationship between concurrent MHD and OUD and how they have similar risk factors
- Understand key features and options for treatment for OUD

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OUD

Rates within 1 year, from US survey data from 2015-2017.

Jones CM, et al. 2019

## Opioid Use Disorder and Co-Occurring Mental Health Disorders (MHD)



- Depression, anxiety disorders and PTSD are the most significant co-morbidities
  - 2.5 times increased risk of suicide
- These conditions often go undiagnosed and untreated and are a barrier to being successful in OUD treatment.

Jones CM et al 2019 Savant et al, 2013

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Assessing Mental Health Disorders in the Context of Substance Induced Disorders:

MHD are VERY Common in People with

Mental Health Disorders and OUD



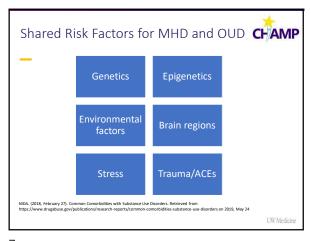
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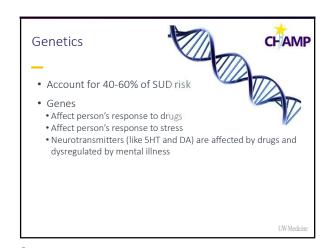
**CHAMP** 

No Mental Illness: 9%

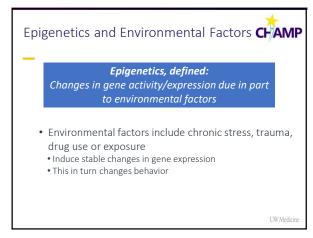
- Screeners will be more accurate after therapeutic dose of medications is reached and maintained
- Always screen initially for acute issues like suicide ideation, but rescreen for mental health disorders after four weeks
- Other evidence of a primary mental health disorder
- History of prior recurrent episodes
- Strong family history of mental disorder
- History of mental illness during periods of recovery

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Brain Region Involvement

The Brain

Reward

Decision

Making

Impulse Control

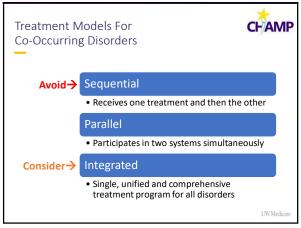
Emotions

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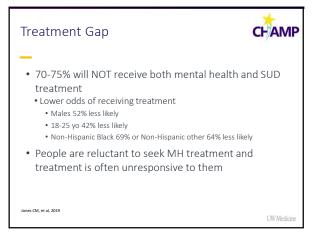
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MH Impacts OUD Treatment Access



Only 28% of providers with DATA 2000 waiver prescribing

- 92 providers interviewed
- Reasons why they will not prescribe
- #1 reported barrier: lack of mental health and psychosocial support for patients
- Lack of institutional support
- Funding barriers

Hutchinson, E., et al. (2014); Knudsen, Abraham, & Oser (2011)

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Supporting Medication Treatment for OUD



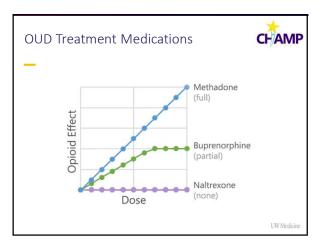
- Multiple benefits of MOUD
- Reduces deaths
- Well-tolerated
- Support Recovery
- Stabilize function and control cravings
- Prevent recurrence of symptoms
- · Backed by research
- Medications are the standard of care
- Many years of safe and effective use



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Medications for Opioid Use Disorder (MOUD)

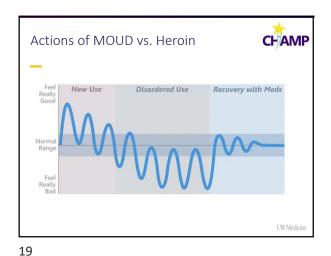


- Methadone
- Full opioid effect, only available in opioid treatment programs
- Heavily regulated, no ceiling effect- overdose potential
- Buprenorphine
- Partial opioid agonist
- Commonly available as pills or fills in a duo product with naloxone (Suboxone)
- Naltrexone
- Blocks opioid receptors
- Monthly in-clinic Injection (also available as a pill for alcohol use disorder), patient must be opioid free 7-14 days prior to start

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Treatment Options

Clarify important differences in three settings:

Medication options
Other supports/structure
Visit frequency

Evidence suggestions medications are the most effective approach of treating OUD

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Journal Articles Cited

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