

Who We Are

An interprofessional team of graduate students enrolled at Wright State University (WSU) in Dayton, Ohio, dedicated to the mission of prevention and early treatment of addiction.

- Anna Hayburn, Psy.M, WSU School of Professional Psychology
- Megan Smith, B.A., WSU Boonshoft School of Medicine and Master of Public Health Program
- Elizabeth Williams, B.S., WSU Master of Public Health Program
- Mussa Zatreh, B.S, WSU Master of Public Health Program

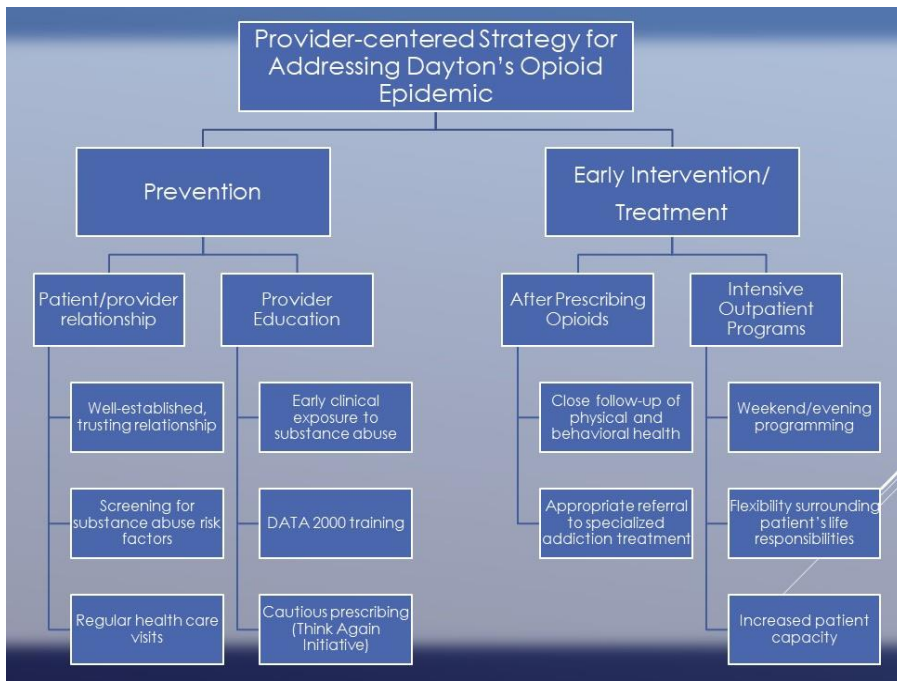
Problem Overview

The city of Dayton, Ohio has gained an unfortunate reputation as the “overdose capital of America” after racking up 365 deaths related to opioid overdose in the first five months of the year 2017. Though prescription opioid abuse remains a public health concern in Dayton, synthetic opioids such as fentanyl are responsible for the majority (58%) of opioid-related overdose deaths. Rates of opioid dependence have skyrocketed, far exceeding the capacity of our state’s available addiction treatment programs.

The opioid epidemic arose from the interplay of a number of complicated factors related to both patients and providers. Individuals who misuse substances often have limited coping skills. When stress or pain becomes overwhelming, individuals may turn to the instant gratification of drug abuse rather than employing healthy coping mechanisms. In addition, substance abusers may not be aware of what resources are available to help them overcome chemical dependency, preventing them from seeking early treatment. Providers played a role in the development of this problem by overprescribing dangerously addictive medications, contributing to an opioid-dependent population in Dayton. Many patients who were able to access treatment unfortunately find that rigid therapy schedules and attendance policies prevent them from continuing.

Strategy

Our two-pronged approach addresses addiction at its core by emphasizing the role of health care providers in prevention and early treatment. A strong patient-provider relationship and ongoing provider education about substance abuse management allows for open discussion of developing issues with substance use before it becomes problematic.



For patients who have already started down the path to opioid dependence, we propose that providers maintain close follow-up with patients after prescribing opioid medications for early identification of physical or behavioral health issues. In addition, specialized addiction treatment centers need to adopt a patient-centric approach to therapy, offering flexible scheduling and accommodating life's responsibilities.

Outcome Measures

The progress and improvements from this plan are measured in three main metrics:

- 1) Reducing the number of new opioid users each year. This will help measure prevention and early treatment.
- 2) Reducing the number of existing opioid users each year. This will measure early treatment and improvements in patient-provider relationships.
- 3) Reducing the number of overdose deaths each year.

Cost and Sustainability

Costs associated with these efforts would be solely administrative, building on existing framework. For example, provider education can be addressed by continuing education credits.

Discarded Plans

A multifaceted approach tackling addiction at several points (illicit drug supply, prevention, early treatment, harm reduction, relapse prevention) was determined by our team to have too broad a scope. Our team feels that a focused strategy honing in on the root cause of addiction is more viable and productive.