Politics

Lawmakers Eye Treatment Programs in Opioid Battle

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A combination of short-term intensive treatment beds, long-term outpatient services and medically assisted treatment could be the blueprint for a solution to the opioid epidemic gripping the state, a powerful Senate chairwoman said Wednesday.

The Senate Health and Human Services Appropriations Subcommittee was the latest panel to take testimony from substance-abuse and mental-health providers, doctors and researchers about opioids, addiction and the types of treatments and services shown to combat what one expert characterized as a pandemic.

Echoing what others have said, Wednesday's panelists told the subcommittee that the best way to address the issue is a multi-pronged approach.

The experts convinced Chairwoman Anitere Flores, a Miami Republican who also learned that the complex situation involves providing low-income housing for recovering addicts.

The suggestions provide “a really good roadmap” for what works, Flores said before the meeting ended.

“The harder part now is to figure out where we get the money, but we'll work on it,” Flores pledged.

Lawmakers have consistently been told that state funding needs to be spread to a combination of short-term residential treatment, longer-term outpatient treatment and medically assisted treatment involving prescription drugs that can help addicts cope with cravings or remove the urge to use drugs altogether.

Flores said she hasn't decided how much the state should spend on the opioid issue, but seemed to have settled on a combination of treatments.

“How much in each part, obviously the details are a little complicated, but I'd like for us to spend a significant amount, whatever that means,” she said after the meeting.
Mark Stavros, an emergency-room doctor who teaches at Florida State University’s medical school and owns an addiction-treatment facility in Panama City, explained to the panel how opioids --- including prescription drugs such as OxyContin and street drugs, like heroin --- change the way the brain functions by affecting dopamine levels.

Addicts “get to the point where nothing is pleasurable to them but the drug” because it’s the only thing that gives them a feeling of pleasure, Stavros said.

“Many people taking opiates are not doing it to get high,” he said, adding that they’re using drugs “just to feel normal again.”

Getting addicts stabilized on medications like methadone or buprenorphine, also known as or Suboxone, allows them to benefit from other types of therapy, work in meaningful jobs and engage with their families, said Valerie Westhead, a psychiatrist who is chief medical officer of Aspire Health Partners in Orlando.

Experts like Westhead and Stavros label opioid addiction a chronic disease, like diabetes.

“Exposing a brain to opiates causes changes, regardless of whether you become addicted or not,” Westhead said. “It stops being something that you’re choosing to do, and it becomes something that you have to do.”

But Westhead said she and others have had positive results using naltrexone, or Vivitrol, an injectable medication that lasts for 30 days.

In her 30 years of treating substance abuse disorders, Westhead said “she has never seen a medication that has worked as well as naltrexone.” The drug allows addicts “to stabilize their lives and move forward,” she said.

Flores appeared wowed by Westhead’s testimony.

“We heard some pretty powerful testimony today from medical experts that said we have got some medicine out there that actually works,” Flores said. “She didn't say it was a miracle drug, but she came pretty darn close to saying that.”

Gov. Rick Scott is asking for $50 million to address the opioid crisis, which prompted him to declare a public health emergency this year. But the governor hasn’t specified how he wants the money to be spent. Substance abuse and mental health providers are also seeking $50 million.

Meanwhile, the state is moving forward with $27 million in federal funding for the opioid epidemic. John Bryant, assistant secretary of substance abuse and mental health at the Department of Children and Families, said part of the money will be spent on opening 49 new methadone treatment centers --- double the current number --- in areas with the highest need.

The federal funding also includes nearly $1.8 million for naloxone, a drug also known as Narcan, that is used to reverse opioid overdoses.

But some lawmakers, including Flores, expressed concern about relying on the overdose kits to save lives but failing to provide follow-up services --- like medication-assisted treatment --- to prevent repeated overdoses.

“The thing that is profoundly difficult for me is we're talking about the DCF overdose prevention program,” said Sen. Lauren Book, D-Plantation.
"When I think of prevention, I think of ... the root cause for why somebody is looking for drugs in the first place ... and we're not really looking at some of those root causes," she said. "We're temporarily dealing with an issue but we're not systemically changing the way we look at, think about, this issue. It's just so troubling. It's difficult."