



Mark S. Gold, MD

ASAM's Annual Lifetime Achievement John P. McGovern
Award & Prize Winner

Adjunct Professor of Psychiatry

Washington University School of Medicine

St. Louis, MO

17th University of Florida Distinguished Alumni Professor

Gainesville, FL

Mark S. Gold, MD

Disclosures

- Dr. Gold has no disclosures to report.



Tobias Wasser, MD

Chief Medical Officer, Whiting Forensic Hospital
Middletown, CT

Assistant Professor of Psychiatry

Yale University School of Medicine

Associate Director, Yale Fellowship in Public
Psychiatry

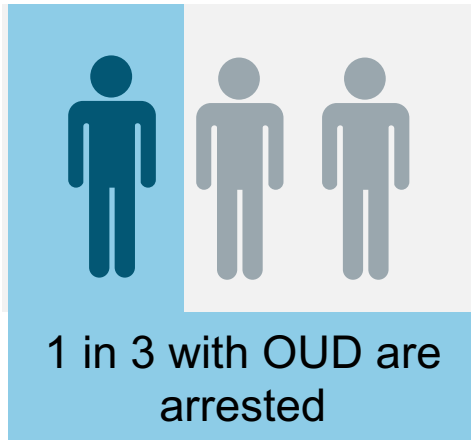
New Haven, CT

Tobias Wasser, MD

Disclosures

- Dr. Wasser has no disclosures to report.

Correctional Facilities: OUD Treatment Gaps



- Most individuals with OUD will not receive treatment while incarcerated
- Forced withdrawal likely contributes to post-release overdose due to increased opioid craving and reduced tolerance
 - Death rates surge 200% - 700% in weeks after release primarily a result of opioid overdose
 - Forced withdrawal reduces the likelihood that individual will reenter treatment upon release
- 1 in 20 on community supervision referred to treatment receive first-line therapy

MAT Barriers and Challenges

- Per Federal Bureau of Justice, of nation's 5,100 jails and prisons, < 30 have methadone or buprenorphine programs¹
- In a national survey of medical directors from 50 state and Federal Department of Corrections' facilities, found a general preference for abstinence-based policies vs. MAT²
 - Misconceptions about addiction
 - Incorrect association of forced withdrawal with curing opiate dependence
 - Ignoring risk to relapse
 - Lack of education
- Difficulty connecting individual to treatment upon release

1. Williams T. Opioid users are filling jails. Why don't jails just treat them. *The New York Times* Website. <https://www.nytimes.com/2017/08/04/us/heroin-addiction-jails-methadone-suboxone-treatment.html>. Published August 4, 2017. Accessed September 1, 2018.; 2. Nunn A, et al. *Drug Alcohol Depend.* 2009;105(1-2):83-88.

Impact of Continuing MMT During Incarceration Compared to Forced Withdrawal

- MMT continuation group (n = 184) compared to forced withdrawal control group (n = 198)
- Inmates in the MMT continuation group were less likely to receive disciplinary tickets (OR = 0.32)
- By 30 days post-release, 40.6% of the MMT continuation vs. 10.1% of the control group had re-engaged in the community (OR = 6.08)
- Inmates who engaged in MMT with the same provider before, during, and after incarceration were less likely to recidivate
 - Recidivism outcomes include re-arrest, reincarceration, receipt of new charges (drug, violent, felony, misdemeanor) within 6 mon of release

MMT = Methadone maintenance treatment
Moore KE, et al. *J Addict Med.* 2018;12:156-162.

Novel Approaches: Rhode Island Department of Corrections (RIDOC)

- New model of screening and protocol for MAT treatment (methadone, buprenorphine or naltrexone) launched in 2017
- Individuals arriving at RIDOC receiving MAT were maintained without tapering or discontinuation
- System of 12 community-located Centers of Excellence in MAT established to promote transitions and referrals upon release

Novel Approaches: Rhode Island Department of Corrections (RIDOC)

Characteristic	First 6 Mons of 2016	First 6 Mons of 2017
Admission for incarceration, No.	4822	4512
Release from incarceration, No.	4005	3426
No. of inmates receiving MAT monthly, mean (SD)	80 (18)	303 (39)
No. of inmates receiving a specific MAT monthly, mean (SD)		
Buprenorphine	4 (3)	119 (15)
Methadone	74 (16)	180 (25)
Naltrexone	2 (1)	4 (1)
Naloxone kits dispensed at release from incarceration, No.	72	35

Green TC, et al. *JAMA Psychiatry*. 2018;75(4):405-407.

Results: 60.5% Reduction in Mortality

Decedents with Recent Incarceration	
First 6 months 2016	First 6 months 2017
26/179 (14.5%)	9/157 (5.7%)

- 60.5% reduction in mortality ($p = 0.01$)
- Identification of OUD in criminal justice setting with linkage to medication and supportive services after release is a promising strategy to reduce overdose and OUD