

Impact of Opioids

United States

- The US consumes 80% of the world's prescription opioids
- Each day 91 people die from an opioid overdose, the majority of which are from prescription opioids

North Carolina

- In 2015, there were 1,110 opioid deaths, compared to 150 in 1999
- 67% of poisoning deaths in 2015 were due to opioids
- 77% of opioid deaths in 2015 were due to prescription opioids
- NC has 97 opioid prescriptions for every 100 people

National Resources

CDC (www.cdc.gov/drugoverdose)

- National and State data; training; publications
- Guidelines for prescribing opioids

SAMHSA (www.samhsa.gov/atod/opioids)

- General information; survey data
- National Registry of Evidence-based Programs and Practices
- Opioid Overdose Prevention Toolkit

US HHS (www.hhs.gov/opioids/about-the-epidemic)

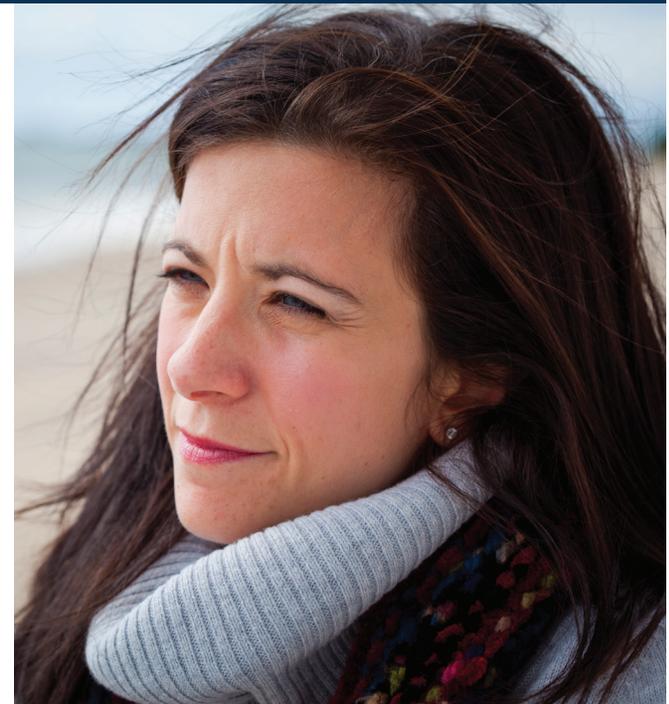
- Prevention/treatment/recovery resources
- Law Enforcement Resources

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If you or a loved one is
experiencing a mental health
or substance use crisis, call

**Cardinal Innovations Healthcare
Access Line**

1.800.939.5911
for assistance 24/7



OPIOIDS:
Understanding
Addiction and Recovery

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OPIOIDS:

Understanding Addiction and Recovery

Addiction Facts

Addiction is a chronic brain disease.

Vulnerability to addiction is 40 to 60% genetic.

Addiction is a disease caused by changes in brain chemistry.

- Dopamine is a brain chemical that produces a sense of pleasure and increases motivation
- Drugs of abuse cause massive increases in brain dopamine levels; much greater than would naturally occur
- This is experienced as intensely pleasurable and the person seeks to feel this repeatedly
- Cravings to use the drug become intense
- Cravings override reason, judgement and fear of consequences
- Avoiding withdrawal symptoms also becomes a powerful motivator to continue using the drug



Your Partner in Recovery

- 24/7 crisis and referral: 1.800.939.5911
- County-by-county assessment and planning
 - prevention activities
 - training resources/needs
 - service/provider gaps
 - best practice promotion and quality management
 - stakeholder/collaborative needs
- Adoption of Clinical Practice Guidelines for substance use disorders to assist in clinical decision-making and to improve care
- Case management for people with substance use disorders
- Substance use disorder team, including psychiatrists, pharmacists and clinicians
- Additional funding for Medication Assisted Treatment
- Crisis training for law enforcement including EMS and 911 operators
- Strong local and regional provider network of outpatient, medication, community-based intensive, residential, detox and inpatient substance use disorder treatment services

Treatment Options

- Abstinence/Harm Reduction: Avoiding opioid use completely or minimizing the impact of opioids on individuals and communities to the greatest possible extent
- Medication Assisted Treatment (MAT): Using medicine to eliminate cravings, withdrawal symptoms, and drug-seeking behaviors. Should be used in conjunction with counseling, family supports and community services and supports
- Psychosocial interventions: Counseling, group therapy, support groups, 12-step programs such as AA and NA
- Naloxone Rescue: Naloxone (Narcan) is a prescription medication that will reverse an overdose from a prescription opioid or heroin. 38,000 kits dispensed since 2013; with 6,268 successful rescues
- Other enhanced levels of care including detox, residential and inpatient

Who We Are

Cardinal Innovations Healthcare is the country's largest specialty health plan, insuring more than 850,000 North Carolinians with complex needs.

We have led the way in developing services, processes and solutions that improve the lives of our members and their families.

Cardinal Innovations addresses substance use disorder by focusing on prevention, education, community partnerships and quality, effective treatment.