

Ohio PREP Region 6 Quarterly Newsletter

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Canton City Health Dept.

Molly Malloy, RN
PREP Coordinator/Trainer
Canton City Health Dept.

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January 2018

Personal Responsibility Education Program (PREP)

NEW STAFF TRAINING

Two day (12 hour) training

When: Thursday, March 8 & Friday, March 9, 2018

Where: Canton, Ohio

More details coming soon!

AGENCIES IMPLEMENTING YOUTH CLASSES OCTOBER 2017– DECEMBER 2017

Indian River Juvenile Correctional Facility
Trumbull County Juvenile Justice Center

INTERESTED IN LEARNING MORE ABOUT OHIO PREP?

Learn *why* teaching youth about sexuality is important and *how* to talk to youth about sexuality. For more information, contact Frank Catrone at the Canton City Health Department at fca-trone@cantonhealth.org or 330-489-3322.



Public Health
Prevent. Promote. Protect.
Canton City Health Department

Ohio | Department of
Youth Services

Ohio PREP

Personal Responsibility Education Program

FREE

Region 6 Coalition Meeting Invitation

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The Evolution of the Opioid Epidemic

Presented By: **Amanda Archer, MPH**

In 2008, unintentional drug overdoses became the leading cause of accidental death, replacing car crashes for the first time in history. Fast forward to 2016, when Ohio lost more lives to unintentional drug overdoses than had ever been previously recorded (4,050), and was the deadliest state in the nation for drug overdoses. How did this happen and how did we not see this coming?

This presentation will discuss policy in Ohio that is related to the opioid epidemic. As we move through combating this epidemic, it is important to reflect on the two sides of policy, and ask, “who does this help,” “who does this hurt,” and “how can we do better?”

Amanda Archer is a graduate of Kent State University, with a Bachelor of Science in Biology. She completed her graduate work through the University of Akron, earning her Master of Public Health, with a focus on addiction, and its impact on public health and communities, specifically Stark County. Amanda currently is the Epidemiologist at the Canton City Health Department, with a primary focus on infectious disease, opiate related community issues/trends and infant mortality. Her previous experience includes three years as an adjunct instructor in Allied Health and eight years with the Stark County Coroner’s Office, including five years as their Forensic Coordinator.

Wednesday, January 31, 2018

10:00 a.m.-12:00 p.m.

Stark County District Library (McKinley Room)
715 Market Ave N.
Canton, Ohio 44702

Lunch on your own

The Ohio PREP Region 6 quarterly coalition meeting will immediately follow the presentation.

Seating is limited.

RSVP by Friday, January 26, 2018 to

Molly Malloy at mmalloy@cantonhealth.org or 330-489-3322.

Ohio PREP is funded by The Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), Family and Youth Service Bureau (FYSB) and administered by the Ohio Department of Youth Services in partnership with The Ohio Department of Health and The Ohio Department of Job and Family Services.

Promising actions for safer opioid prescribing.



Problem: High prescribing
Solution: Safer prescribing practices



Problem:
Too many prescriptions



In 2015, the amount of opioids prescribed was enough for every American to be medicated **around the clock for 3 weeks**.

(640 MME per person, which equals 5 mg of hydrocodone every 4 hours)



Solution:
Fewer prescriptions

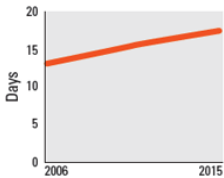
Use opioids **only** when benefits are likely to outweigh risks. Options other than opioids include:

- Pain medicines like acetaminophen, ibuprofen, and naproxen
- Physical therapy and exercise
- Cognitive behavioral therapy

Therapies that don't involve opioids may work better and have fewer risks and side effects.



Problem:
Too many days



Average days supply per prescription increased from 2006 to 2015.

Even at low doses, taking an opioid for more than 3 months increases the risk of addiction by **15 times**.



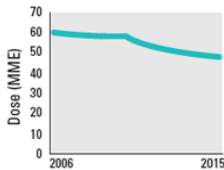
Solution:
Fewer days

For acute pain, prescriptions should only be for the expected duration of pain severe enough to need opioids. **Three days or less** is often enough; more than seven days is rarely needed.

If continuing opioids, ask whether benefits continue to outweigh risks. If not, use other treatments and taper opioids gradually.



Problem:
Too high a dose



Average daily MME per prescription declined both nationwide and in most counties, but it is still too high.

A dose of 50 MME or more per day **doubles** the risk of opioid overdose death, compared to 20 MME or less per day. At 90 MME or more, the risk increases **10 times**.



Solution:
Lower doses

Use the **lowest effective dose** of immediate-release opioids when starting, and reassess benefits and risks when considering dose increases.

Avoid a daily dose of 90 MME or more. If already taking high doses, offer the opportunity to gradually taper to safer doses.

For more recommendations when considering opioids for chronic pain outside of end-of-life care, see the **CDC Guideline for Prescribing Opioids for Chronic Pain**. The *Guideline* can also be used to inform health systems, states, and insurers to ensure appropriate prescribing and improve care for all people.

www.cdc.gov/drugoverdose/prescribing/guideline.html