

Editorial: Heroin epidemic demands federal response

March 18, 2016

States like Ohio have been on the front lines in the fight against heroin and opiate addiction.

That must change.

The Fed Up! Coalition, a collaborative formed in 2012 to urge lawmakers to take action on this epidemic, is among the critics of the federal government's response, which it calls "slow and tragically ineffective." The numbers support that claim: Opioid abuse, including from heroin, killed a record 28,674 people, including 2,482 Ohioans, in 2014, according to the Centers for Disease Control and Prevention.

Long-awaited prescribing guidelines by the CDC, as well as movement on important bills sponsored by Ohio Sens. Rob Portman, a Republican, and Sherrod Brown, a Democrat, offer new hope to the millions of people held captive by one of the worst drug problems to sweep across the United States in decades. Here are the latest developments:

On Tuesday, the CDC announced the first national standards for prescribing opioids. CDC Director Dr. Thomas Frieden said opioids "carry substantial risk, but only uncertain benefits." The epidemic grew out of the over-prescribing of painkillers like Percocet, Vicodin and OxyContin. Some addicts turned to heroin as it became cheaper and easier to obtain.

The new guidelines urge doctors to prescribe medications like aspirin and ibuprofen first or resort to other alternatives. Opioids should only be given in small doses and for short periods of time, preferably only three days. As The New York Times notes, the CDC has lagged many states, including Ohio, in setting guidelines for doctors.

Last week, the Senate passed the Comprehensive Addiction & Recovery Act (CARA) 94-1. Cosponsored by Portman, the bill would fund prevention, treatment and recovery programs for pregnant women, babies, teens, veterans and others. Under the bill, naloxone, the overdose antidote, would be more readily available to law enforcement and first-responders; more money would be steered toward identifying and treating incarcerated addicts; and drop-off sites for unused prescription medications would be expanded. Also, state prescription drug monitoring programs, like the Ohio Automated Rx Reporting System, would be eligible for additional funding.

It also funds education programs like the Screening, Brief Intervention and Referral to Treatment (SBIRT) program, which the Universal Health Care Action Network is trying to implement in school districts across Ohio in order to identify teens with substance abuse problems. Nine in 10 people with an addiction started using before they turned 18, statistics show.

The bipartisan bill heads to the House for consideration. Unfortunately, it authorizes funding, but fails to actually appropriate it.

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Brown's cosponsored bill, The Recovery Enhancement for Addiction Treatment (TREAT) Act, allows doctors to treat larger numbers of drug-addicted patients with supervised, medication-assisted treatment (MAT) and for the first time gives certain nurse practitioners and physician assistants the ability to do the same.

The bill, first proposed in 2014, addresses a major problem for people struggling with addiction: long waiting lists for treatment. Those waiting lists exist, in part, because of limitations on the number of patients doctors can treat using MAT programs. The bill addresses those limitations. It was approved by the Senate's Health, Education, Labor, and Pensions (HELP) Committee Wednesday.

This indiscriminate and devastating epidemic demands a federal solution. Lawmakers from both chambers should act quickly and decisively on these bills.