Hidden Casualties:
The Opioid Crisis and Infectious Diseases

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Latest Statistics
Sept 2016 – Sept 2017

- Drug overdose deaths: 67,944
- Opioid deaths: 45,657
- Drug overdose deaths increased 13% from previous year
- Opioid overdose deaths increased 16% from previous year
- Overdose deaths accounted for 2.4% of overall US deaths

Injection drug use has increased 93% (2004-2014)

PERCENT CHANGE IN DRUG OVERDOSE DEATHS BY STATE

States with Notable Increases

- Ohio 26%
- Pennsylvania 33%
- Indiana 28%
- Illinois 18%
- New Jersey 43%
- Delaware 33%
- Nebraska 33%
SYNDERMICS (Synergistic Epidemic)

A set of interconnected health problems that often have common root causes and interact synergistically with one problem making the other worse.
CONSEQUENCES OF THE OPIOID EPIDEMIC

• HIV
• Hepatitis B
• Hepatitis C
• Endocarditis
• Skin, bone, and joint infections
EFFECTS OF OPIOID USE DURING PREGNANCY

Outcomes in the fetus
- Growth restriction
- Prematurity
- Death

Outcomes in the Newborn
- Low birthweight
- Small head circumference
- Neonatal abstinence syndrome

Outcomes in the Child
- Developmental disorders

(Image from Neurology Advisor, June 2017)

(McQueen and Murphy-Oikonen, NEJM, 2016)
OASH AS A DRIVER OF SOLUTIONS

• Senior advisor to the Secretary on matters of public health and science
• Unequaled situational awareness of the nation’s health issues
  - Position in the Immediate Office of the Secretary
  - Diverse Offices (including Office of HIV/AIDS and Infectious Disease Policy)
  - Presidential and Secretarial Advisory Committees

• Catalyzes new partnerships, programs, health-promoting approaches

• Provides evidence based guidelines and strategies:
  Nutrition Guidelines, Fitness Guidelines; Healthy People 2020;
  National HIV/AIDS Strategy; National Viral Hepatitis Action Plan

• Current Mission:
  Optimize the nation’s investment in health and science to advance health equity and improve the health of all people
DETERMINANTS OF LONGEVITY AND QUALITY OF LIFE

- Social and Economic Factors: 40%
- Health Behaviors: 30%
- Physical Environment: 10%
- Clinical Care: 20%
Office of the Assistant Secretary for Health

PHILOSOPHY:

**HEALTH FOR ALL**
Assure that everyone has a fair and realistic opportunity to optimize their health

**HEALTH BY ALL**
Distribute and democratize health care knowledge, capabilities, and delivery

**HEALTH IN ALL**
Prioritize health considerations in all sectors and policy areas
Consequences of the Opioid Epidemic on the Spread of Infectious Disease: Incidence, Prevalence, and Mutually Beneficial Opportunities to Improve Prevention, Care, and Treatment in the United States

• Will publish workshop summary report to inform future program and policy recommendations for OHAIDP and its partners (Summer 2018)
• Nationwide dissemination plan for the workshop summary report, which will guide important future directions for an integrated national opioid response
• A live and archived webcast of the workshop
SENIOR ADVISOR FOR MENTAL HEALTH AND OPIOID POLICY

• Point person for the development and implementation of the response to the opioid epidemic throughout HHS

• Working with every agency and office to prioritize actions, understand gaps, and develop new synergies

• Engage partners throughout the federal government, at the state and local levels, as well as commercial, non-profit, and academic partners
OPIOIDS: HHS FIVE POINT STRATEGY

• Strengthen public health data reporting and collection
• Advance the practice of pain management to decrease the inappropriate use of opioids
• Improve access to prevention, treatment, and recovery services
• Enhance the availability of overdose-reversing medications
• Support cutting-edge research that improves our understanding of pain and addiction, leads to new treatments, and identifies effective public health interventions
We need all partners to be engaged, to help utilize our very effective tools at the national scale, while being patient and family-centric in our approach.
STATE TARGETED GRANTS

• April 18, 2018: HHS released the 2nd installment of the state targeted grants totaling $485M
  - Greater flexible on how states can allocate their funds across the prevention, treatment, and recovery spectrum
  - Requires MAT to be offered in treatment programs

• We will soon be issuing the funding announcement for the additional $1B for states, and we plan to have this money available by the end of September
  - $150M set aside for states hardest hit
  - $50M set aside for Tribes
  - Remainder to be allocated by a formula – will emphasize disease burden
SOME SIGNS OF PROGRESS

• The amount of opioids in MME prescribed decreased 12% in 2017

• Nasal spray naloxone distribution significantly increased
  - > 1 million 2-dose packs distributed in 2017
  - > 650,000 2-dose packs distributed this year alone
  - 70% directly to state and local partners

• The number of patients receiving MAT dramatically increased

• FDA in conjunction with DOJ have dramatically increased drug interdiction
  (focus on synthetic opioids from China in international mail)

• Drug takeback day, April 26, >950,000 pounds of drugs collected
PRESIDENT’S FY2019 HHS ALLOCATION OF OPIOIDS $$$

- $150M: Reducing Injection Drug Use, HIV/AIDS, and Hepatitis C
- $1B: State Targeted Response Grants
- $150M: Rural Health Addressing Substance Abuse and OUD
- $544M: Community Health Centers
- $300M: CDC Surveillance
- $860M: Pain and OUD Research including Regulatory Science

Numerous new programs, regulations, guidance from HHS to combat the opioid epidemic and improve patient outcomes holistically.
Learn more:

• [www.hhs.gov/opioids](http://www.hhs.gov/opioids)

Share your story:

• [www.crisisnextdoor.gov/](http://www.crisisnextdoor.gov/)

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