




Northeast Ohio
OPIOID CONSORTIUM

Consortium Chronicle NEWSLETTER



The Center hosted an In-Person Roundtable entitled “**Using Collaboration to Address the Opioid Crisis in Northeast Ohio**” on September 20 with over 85 attendees attending to learn about local efforts in response to the opioid crisis, including harm reduction, recovery services, and pharmacologic treatment. We will be posting materials from the convening at [Using Collaboration to Address the Opioid Crisis in Northeast Ohio \(neohospitals.org\)](https://neohospitals.org). Pictures from the event are posted on [The Center’s facebook page](#). We have also uploaded an audio

recording of the proceeding as well and the recording of the Opioid Consortium education session on [our YouTube channel](#).



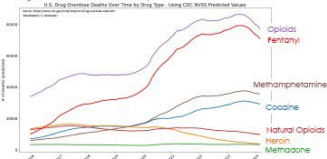
JACK JOSEPH AND MORTON MANDEL
SCHOOL OF APPLIED SOCIAL SCIENCES
CASE WESTERN RESERVE
UNIVERSITY
CUYAHOGA COUNTY
BOARD OF HEALTH

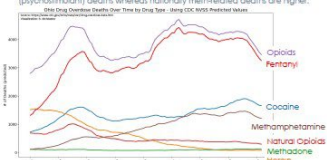
Empowering Action Through Data

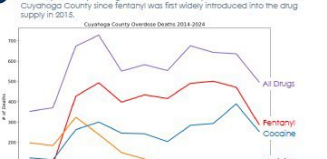
Understanding Drug Overdose Trends & Emerging Threats to Guide Response and Prevention

Drug Mortality

- 1 National.** While a national fentanyl-related death decrease of -9% from 2023 to 2024 appears realistic, the total number will likely be the fourth highest number of deaths in history.


- 2 Ohio.** Ohio's trends in overdose death closely align with overall national trends, but in Ohio cocaine-related deaths exceed methamphetamine (psychostimulant) deaths whereas nationally meth-related deaths are higher.


- 3 Cuyahoga County.** Fentanyl-related deaths are projected to decrease in 2024, potentially making it the second-lowest year for overdose deaths in Cuyahoga County since fentanyl was first widely introduced into the drug supply in 2015.



Critical Insights: Our Overdose Epidemic

Deaths declining, but 2024 is still extremely high
Fentanyl deaths and seizures have declined from record highs in 2023... yet 2024 is still projected to rank as the fourth highest year for fentanyl-involved deaths. 1 through 3

Clevelanders with lived experience are heard
A recent research report highlights key insights from people with lived experience of opioid overdose, revealing treatment barriers, unmet basic needs, and the widespread prevalence of polysubstance use. 4

Cocaine and fentanyl-involved deaths are a bigger concern in Ohio than other states
Nationally, methamphetamine-related deaths are outpacing cocaine, but in Ohio, cocaine remains the leading drug in overdose deaths, often alongside fentanyl. This trend, though decreasing in 2024, continues to disproportionately impact Black communities. 5 6

Cuyahoga Co. MOUD/MAT: room for improvement
Compared to similar counties, Cuyahoga County shows significant disparities in rates of OUD diagnosis, linkage and retention to MOUD/MAT in the Medicaid population. 7

Cocaine & fentanyl in Cleveland: Rising disparity
In 2017, 81% of Cleveland's combined cocaine & fentanyl-related deaths involved White individuals, but by 2022, the trend has drastically shifted with Black individuals accounting for nearly half of the 133 deaths. 8

Record amounts of fentanyl seized at border
2023 saw record fentanyl seizures by U.S. Customs and Border Patrol, with a sharp drop in early 2024, followed by a mid-year spike, including July's fourth-highest seizure on record. 9

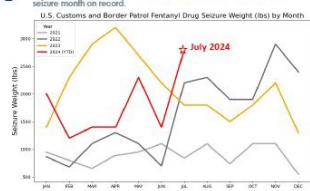
Opportunity and drug mortality in Cuyahoga County
A recent analysis shows that addressing the overdose crisis in Cuyahoga County requires a comprehensive approach, as drug mortality is closely tied to deeper issues like opportunity, access to resources, and social determinants of health. 10


Cleveland among hardest hit in the nation
Cleveland and Columbus have consistently ranked among the U.S. cities hardest hit by drug overdose deaths. In 2022, Cleveland's overdose death rate was three times the national average and second only to Baltimore since 2015. These alarming trends highlight the ongoing crisis in Ohio. 11

Drug Supply

- 4 National.** National Fentanyl Deaths and CBP Fentanyl Seizures

Year	U.S. Fentanyl-Related Deaths	% Change	CBP Seizures of Fentanyl (100,000)	% Change
2016	19,500	-	5967	-
2017	26,659	47%	1875*	215%
2018	31,525	10%	1895*	1%
2019	36,603	16%	2575*	36%
2020	56,894	55%	3967*	54%
2021	71,143	25%	10,753**	171%
2022	74,829	5%	19,342**	80%
2023	74,088	-1%	25,000**	30%
2024 **	67,733	-9%	19,816**	-24%
- 5 National.** 2024 may be the first annual decrease in fentanyl seizures and fentanyl-related deaths, but July 2024 marked the 4th highest seizure month on record.


- 6 Cuyahoga County.** The Cuyahoga County Regional Forensic Science Lab (CCRFSL) tests law enforcement drug seizures to track local trends. This graph shows select drug types since 2019; trends show recent drop in fentanyl submissions through mid-2024, aligning with the notable decrease in fentanyl-related overdose deaths.



Suggested Citation: McMaster, R., Bhullar, M. (2024, September). Empowering Action Through Data: Understanding Drug Overdose Trends & Emerging Threats to Guide Response and Prevention. Begun Center for Violence Prevention Research and Education, Jack, Joseph and Morton Mandel School of Applied Social Sciences, Case Western Reserve University.



YOUR OPINION MATTERS – Consortium Chronicle Survey

The Begun Center for Violence Prevention Research and Education at Case Western Reserve University has developed [the survey](#) to examine the contributions of *The Center for Health Affairs Consortium Chronicle Newsletter* and to get your feedback on various aspects of the newsletter. We value your opinion and therefore request you to take this survey. This survey will not take more than 5-10 minutes to complete. Please complete [the survey](#) once started as you will not be able to save the responses and return later. Please complete by October 18.

State / Local Updates

2024 Cuyahoga County ADAMHS Board Community Needs Assessment

The ADAMHS Board released its 2024 Community Needs Assessment. This assessment occurs every four years and involves gathering and analyzing data on the current state of mental health and addiction in Cuyahoga County. Its findings inform the Board's planning and funding decisions, ensuring that resources are allocated effectively and that services remain relevant and responsive to the community's needs. The goal is to accurately and thoroughly represent the

gathered information to guide these decisions and better the quality of care for county residents.

Community partners reiterated the value they believe the ADAMHS Board can provide as the central convener of the many agencies that play a role in community behavioral healthcare. Respondents acknowledged that behavioral health needs have many facets including direct service providers, school systems, courts and jails and peer support.

The ADAMHS Board demonstrated significant strengths in its diverse service offerings, collaborative partnerships, and positive community impact. Notably, the Crisis Intervention Training program—which equips law enforcement officers to identify mental health resources for individuals in crisis and prioritize officer and community safety—highlights the Board's commitment to ongoing education and training for first responders in crisis response and trauma-informed care. The Board's support of harm reduction initiatives, including test strips, NaloxBoxes, and vending machine programs, provides vital resources that are highly valued by the community. Click [here](#) to view the 2024 Community Needs Assessment.

Roads to Recovery '24 Conference (Cuyahoga County)

Tickets for our Roads to Recovery '24 Conference on **October 21, 2024**, are now available for purchase. This conference is for clients, family members and providers of mental health and/or addiction prevention, treatment and recovery services. This year's theme, Creating Healing Communities, reflects the Cuyahoga County ADAMHS Board's efforts to support a recovery-oriented system of care that provides services that are diverse and inclusive and reflect the uniqueness of individuals living with mental illness, substance use disorders and other addictions. Click [here](#) to secure your spot.

Ohio observes Fourth Annual Overdose Awareness Day (Center for Community Solutions)

Opioids kill more than 136 Americans every day, the equivalent of losing a full Boeing 737-700 or Airbus A319 daily. Ohio is one of the states hit hardest, losing 40,841 residents between 2001 and 2022, the last year with complete data. What actions could prevent future overdoses? [Read more.](#)

Recovery Friendly Workplace Program Launched in Ohio

This month, Governor DeWine announced the [Ohio Recovery Friendly Workplace program](#). This is a special designation that businesses can earn by implementing supportive practices to assist those in recovery. The program offers recommended policy and resource recommendations for businesses interested in acquiring this designation. Examples of practices that workplaces can institute include things like providing wellness programs for staff members, training staff on naloxone as a life saving measure and promoting the 988-suicide hotline to employees. The goals of this program are to reduce stigma, create job opportunities for those in recovery and to boost businesses that prioritize holistic approaches to caring for their employees.

Study Shows Solo Drug Use Fuels Accidental Overdose

A recent study entitled [“The Need to Rethink Harm Reduction for People Using Drugs Alone to Reduce Overdose Fatalities”](#) highlights the need for continued harm reduction approaches, especially for those who use alone. Researchers reviewed overdose deaths in Cuyahoga County, specifically looking individuals who used drugs alone. Key findings include that 75% of those who died of overdose were using drugs alone, most often at home, and were less likely to

receive naloxone. Being married, having a history of illicit drug use, or having someone present reduced the odds of using alone. The study highlights the need for new harm reduction strategies to address the risks for those using drugs in isolation.

CDC Provisional Data Show a Pronounced Decline of Ohio Overdose Deaths

Center for Disease Control preliminary data shows a pronounced decline in drug overdose deaths throughout Ohio—one that started in 2023 and seems to be the first significant fall since 2017. It's likely welcome news to health professionals in a state that saw the second highest percentage of opioid overdose deaths in the nation in [2016](#) and [2017](#). Ohio isn't the only state that saw the sudden decline, [according to NPR](#). Although overdose deaths have been hiking for years, sometimes by double-digits, the [CDC numbers show](#) a more than 10% year-over-year drop from April 2023 to April 2024.

The Ohio Department of Health is still finalizing its numbers for 2023, meaning the 2024 data is far off in the future. There is a month-long lag between when the state department first forwards death certificates to the CDC and when it finalizes its mortality database for the year. The Ohio Department of Health is finalizing its 2023 report, but the 2022 report can be found [here](#).

Policy & News Updates

[October is Substance Use Prevention Month](#)

In October, we celebrate Substance Use Prevention Month. To inspire action, each of us can share how prevention is improving lives in our communities. For more information, click [here](#).

[Together We Can: International Overdose Awareness Day 2024](#)

By: Sylvia Las, M.P.H., Public Health Analyst, Center for Substance Abuse Treatment

In 2023, our nation witnessed the [first annual decline in overdose deaths since 2018](#). In 2022, there were over 111,000 deaths. In 2023, that number fell to 107,543. Though modest, this suggests that nationwide efforts to reduce overdoses are making a positive impact. However, the work is not finished.

[New DEA Telehealth Prescribing Proposal Raises Concerns Among Advocates and Politicians alike](#)

A newly drafted DEA-proposal related to severely limiting the prescribing of controlled substances via telemedicine has many political leaders and advocates up in arms. Current regulations (created during the pandemic) have allowed an increase in treatment via telemedicine as clinicians have been able to prescribe most controlled substances seen to pose a risk of misuse — Schedule II-V drugs — without an in-person visit. The new proposal poses a threat to the treatment of those most in need such as individuals with mental health or substance abuse disorders, according to advocates.

In response, the Telehealth Response for E-prescribing Addiction Therapy Services (TREATS) Act has been proposed that would allow patients to get Schedule III, IV and V drugs — including buprenorphine for opioid use disorder, ketamine for depression and testosterone for gender-affirming care — without an in-person visit. However, Schedule II drugs would still require an in person visit with their prescriber.

The DEA has stated it wants to ensure Americans can access necessary treatments while limiting overprescribing and protecting citizens from profit hungry venture capitalists who benefit from using telehealth overprescribe and boost profits. Meanwhile, advocates are raising serious concerns about losing accessibility for treatment for America's most vulnerable populations. They state telehealth has increased the number of people who can enter treatment.

Mental Health Parity Rule Finalized

Health insurance companies will have to upgrade their mental health benefits to match the coverage they offer for other care under a final rule three federal departments issued on September 9, 2024. The latest mental health parity regulation from the Health and Human Services, Labor and Treasury departments, first proposed in July 2023, builds on decades of policymaking designed to promote access to behavioral health and substance use disorder treatment. [FACT SHEET: Administration Lowers Mental Health Care Costs by Improving Access to Mental Health and Substance Use Care | The White House](#)

The rule reinforces the Mental Health Parity and Addiction Equity Act, known as MHPAEA, a 2008 federal law that requires that insurance plans that cover mental health do so at the same level as physical health. The rule instructs insurers to evaluate coverage based on several criteria, including the plan's provider network, how much plans pay for out-of-network coverage and how often prior authorization is required and approved under existing plans.

Naloxone Saves Lives: An Educational Resource for Patients

The IPRO QIN-QIO '[Naloxone Saves Lives](#)' document, available in both English and Spanish, provides clear, concise information to help you have informed discussions with your patients about naloxone and address any associated stigma.

This resource outlines what naloxone is, how it works to reverse opioid overdoses, and why it may be prescribed alongside opioid medications. For pharmacists, the "Naloxone Saves Lives" tool also includes conversation starters and key reminders for offering naloxone, as well as information on free or low-cost statewide programs. We encourage you to utilize this educational material to ensure your patients are equipped with the knowledge they need to access this life-saving medication. Access all the resources [here](#).

[FindTreatment.gov is now available in Spanish!](#)

Designed to serve Spanish-speaking communities, [FindTreatment.gov/es](#) offers confidential and anonymous access to a comprehensive list of certified substance use and mental health treatment facilities, certified community behavioral health clinics, opioid treatment programs, buprenorphine practitioners, and healthcare centers across the United States and its territories.

[FindTreatment.gov/es](#) offers Spanish-speaking individuals the ability to:

- Search for treatment from multiple sources such as certified substance use and mental health treatment facilities, opioid treatment programs, buprenorphine practitioners, and health care centers.
- Access an interactive map and search filters to tailor treatment options.
- Search for a facility by entering address, city, state, zip code or facility name.

- Download printer-friendly search results including facility location (i.e., phone number, address, website, etc.).

All searches on the site are anonymous and confidential – every single time. Please help us spread the word about FindTreatment.gov/es through your networks. We have included a Spanish-language announcement below.

[Lower Opioid Overdose Rate Noted Among Diabetic Semaglutide Users](#)

Although the new findings are "unclear," researchers are curious to see if appetite suppressants could be used for addiction treatment. A separate study found that fentanyl users trying to kick the habit benefited from taking higher doses of buprenorphine, a medication to reduce side effects.

[Stat: Ozempic Linked To Lower Opioid Overdose Rate, Study Shows](#)

People taking semaglutide medications like Ozempic for diabetes may be at reduced risk of drug overdose, according to new research. Prescriptions for semaglutide, which includes Ozempic and Rybelsus, were linked to lower overdose rates among patients with type 2 diabetes who were also diagnosed with opioid use disorder, according to a paper published Wednesday (CWRU Research). (Facher, 9/25)

[Stat: Higher Buprenorphine Dose Safe For People With Fentanyl Addiction: Study](#)

Patients who received higher doses of buprenorphine, a common medication used to alleviate opioid withdrawal and cravings, were less likely to be hospitalized and less likely to discontinue treatment, according to a new study. (Facher, 9/26)

Training Opportunities


4PCP Training Course and Research Study

Wouldn't it be refreshing to approach chronic pain with the same skillsets and confidence you bring to other chronic illnesses, such as diabetes or asthma? This study will teach you skills that allow you to more comfortably manage the unique challenges of chronic pain through your own interdisciplinary team.

The 4PCP course is designed to improve the care of patients with chronic pain by supporting practitioners with as many as 34 CME/MOC training hours in chronic pain management. The cost of tuition is supported by a grant from the Agency of Healthcare Research and Quality. Learn more by visiting www.4pcp.org.

Improving the Care of Patients with Chronic Pain

Research Study Opportunity: Impact of a Novel Community-Based Biobehavioral Chronic Pain Team Training Program (4PCP) on Practitioner and Patient Outcomes



Everyone is asking PCPs to add one more thing to their load.
4PCP aims to lessen your load.

4PCP seeks to give you new tools
to improve your patient outcomes with shorter visits.

4PCP will not increase your panel.
We focus on the most challenging patients you are seeing already.

Research Goals
Evaluate the impact of the 4PCP training program on...

- Practitioner satisfaction
- Patient outcomes
- Opioid dispensing patterns


Clinical Goals
We want to help you...

- Take the **"heart-sink"** out of chronic pain management
- Fill a **toolbox** with patient- and team-centered strategies
- Revolutionize** your chronic pain care with a novel approach **Biobehavioral vs. biopharmacological**

Why 4PCP?
In a pilot study,³

PCPs reported improvements in **diagnosing** and **managing** chronic pain ($P=0.023$) and **treatment satisfaction**.

Average visit time was nearly cut in **half**, from **20** to **11** minutes ($P<0.03$)



Patients showed significant improvements across **5** domains:

- Sensory Pain
- Affective Pain
- Depression
- Fatigue
- Tension

L. Chertkov, et al. Clin J Pain. 2018;34(2):100-104.

Overview

Practitioner Participation

- Complete the course with other practitioners from your clinic
- Course content:
 - Background videos
 - 3 half days of live training (flexible scheduling offered)
 - Case conference
- Complete 6, ~20-minute surveys
 - 2 before course attendance
 - 4 more every 6 months after
- Allow study staff to review your clinic schedule for eligible patients to approach for recruitment

Practitioner Incentives

- Up to 34 hours of CME / MOC
- Up to \$70 (\$10 digital gift card x 6 surveys + \$10 bonus card for completing all surveys)

Patient Participation

- Complete 6, ~20 minute surveys
 - 2 before your course attendance
 - 4 more every 6 months after

Patient Incentives

- Up to \$35 (\$5 digital gift card x 6 surveys + \$5 bonus card for completing all surveys)

Supported by a grant from the Agency for Healthcare Research and Quality - R01HG028630

Dr. Thomas Chelmsky, Oisela Chelmsky, Ted Parron, and Jeff Janota have ownership interest in PainTakers, LLC, the company associated with the 4PCP curriculum used in this project.

Contact Us 4pcp@vcuhealth.org 804.827.4PCP www.4pcp.org

ASAM State of the Art, Course in Addiction Medicine
October 17-18, Baltimore, MD
 Learn More and Register [HERE](#)

This course is designed specifically for physicians and healthcare professionals seeking an advanced level of knowledge about breakthroughs in the field and will include:

- Presentations focused on scientific advances and emerging evidence in addiction medicine
- Sessions organized around key topics that will also be translated into clinically useful knowledge
- Concise presentations delving into understanding, preventing, diagnosing, and treating addiction and co-occurring medical and psychiatric disorders.

Enhance Your Expertise in Treating Substance Use Disorders with Specialized Trainings

The Ohio Substance Use Disorders Center of Excellence (SUD COE) at Case Western Reserve University's Jack, Joseph, and Morton Mandel School of Applied Social Sciences invites practitioners to deepen their understanding of substance use disorder (SUD) treatment. The SUD COE is pleased to offer a series of training programs designed to equip professionals with the latest and most effective strategies in SUD treatment.

To register for training sessions, simply visit the [Mandel School Center for Evidence-Based Practices](#) website. This easy step gives you access to a wide range of trainings designed to enhance your professional skills in SUD treatment.

You can also access information, a list of other trainings and evidence-informed practice resources on the new [SUD COE page](#).

Additionally, by participating in these programs, you'll stay connected with the latest trends in SUD treatment and gain opportunities to join Learning Communities for continuous professional development.

CWRU Opioid Response Network (ORN) Trainings

[Opioid Response Network \(ORN\) Trainings | Center for Evidence-Based Practices | Case Western Reserve University](#)

The Grayken Center for Addiction

has online training both live and pre-recorded

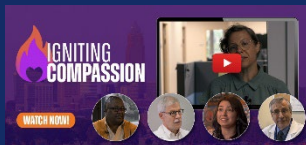
[Upcoming trainings | Training | Grayken Center for Addiction TTA | Boston Medical Center \(addictiontraining.org\)](#)



California Bridge has an online academy with many valuable resources. Their Navigator Training resources are foundational and provide entry level education to explain many different topics.

[Learn more here.](#)

Other Resources



Educational Resources Available from The Center

- [Igniting Compassion Documentary](#)
- [Igniting Compassion Shorts](#)
- [Opioid Consortium Education](#)
- [Naloxone Toolkit](#)
- [A Clinician's Guide: Dental Consequences of MOUD + Solutions](#)
- [Clinicians Guide: on Xylazine Wound Management](#)

- [A Clinician's Guide: The Intersection of Human Trafficking and Substance Use Disorders](#)
- [NEO Opioid Consortium - Beyond Narcan: Treating Opioid Use Disorder in the Field](#)
- [Opioid Roundtable: Using Collaboration to Address the Opioid Crisis in Northeast Ohio](#)



1226 Huron Road East, Cleveland, OH 44115
Click [here](#) to unsubscribe or to change your Subscription Preferences.