

Bridging the Gap Between Science and Clinical Practice:

Discussion with the NIH and AHRQ

NIAAA:

- ☀ George Koob, PhD
- ☀ Daniel Falk, PhD

NIDA:

- ☀ Geetha Subramaniam, MD, DFAACAP, DFAPA

AHRQ:

- ☀ Elisabeth Kato, MD

ASAM Science Initiative Subcommittee:

- ☀ Ken Freedman, MD, MS, MBA, FACP, AGAF, DFASAM (Co-Chair)
- ☀ Tami Mark, PhD, MBA (Co-Chair)



Agenda

3:00 PM – 3:05 PM: Opening remarks from facilitator/Science Initiative Subcommittee Co-Chairs

3:05 PM – 3:15 PM: NIAAA presents

3:15 PM – 3:25 PM: Audience discussion

3:25 PM – 3:35 PM: NIDA presents

3:35 PM – 3:45 PM: Audience discussion

3:45 PM – 3:55 PM: AHRQ presents

3:55 PM – 4:05 PM: Audience discussion

4:05 PM – 4:15 PM: ASAM Science Initiative Subcommittee presents

4:15 PM – 4:30 PM: Additional questions/discussion and session closing by facilitator



Provide Feedback to Federal Research Funding Agencies

Please visit:

<https://forms.gle/UwERDVuKucvmKK1Z9>



#ASAM2020

Bridging the Gap Between Science and Practice: NIAAA Perspective



George F. Koob, Ph.D.

Director

National Institute on Alcohol Abuse and Alcoholism



Disclosure Information

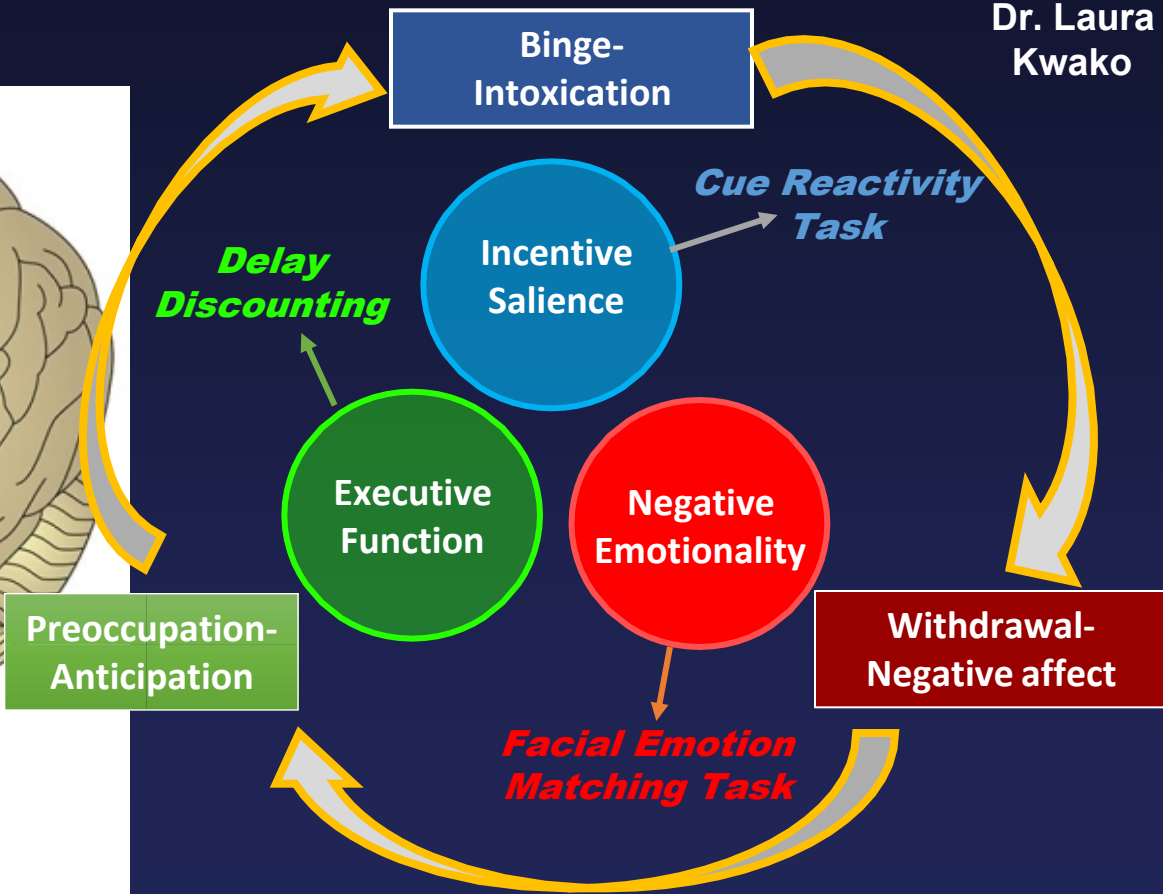
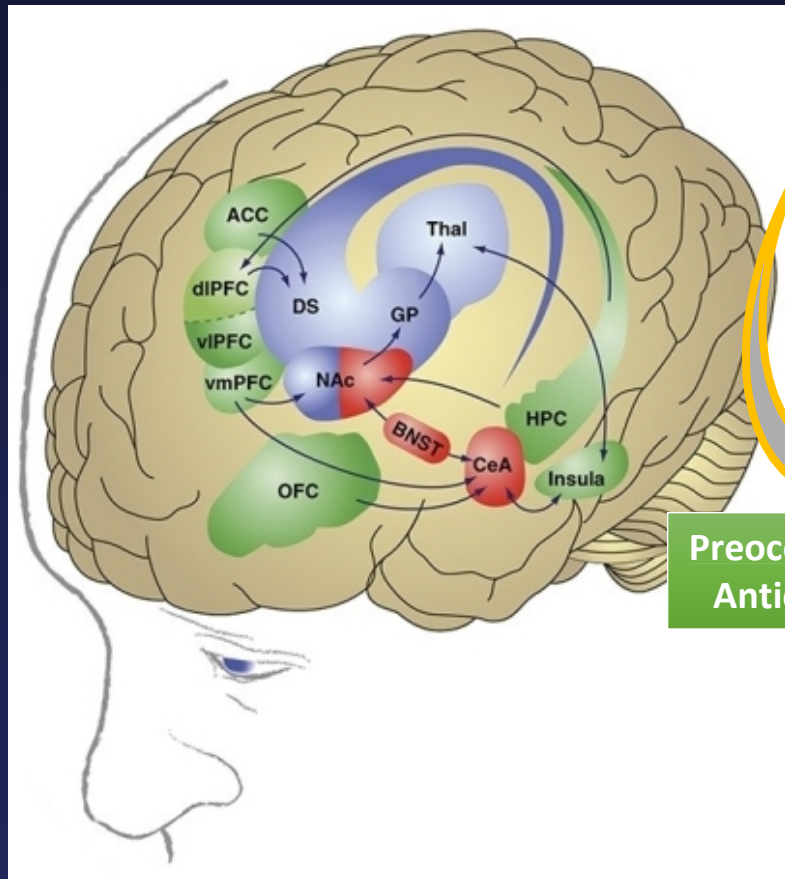
George F. Koob, PhD:

No disclosures.

A Framework for Precision Medicine Through Individualized Diagnosis, Prevention, and Treatment: Addictions Neuroclinical Assessment



Dr. Laura Kwako



From: Ballantyne, Sullivan, and Koob. *Pain* 2019;160:2655-2660

Modified from: Kwako LE et al. *Biol Psychiatry* 2016;80:179-89.

Advancing Diagnosis and Treatment: Alcohol Biosensor Development

- **NIAAA Challenge Prize awarded for development of a wearable, non-invasive BAC monitor that detects alcohol released through the skin (in sweat or vapor). Models are being tested in human laboratory settings.**
- **NIAAA also has an ongoing SBIR/STTR program for small businesses to encourage proposals for the design of a discreet wearable device that measures BAC in real time**
- **NIAAA priority: Development of new devices that measure alcohol directly in blood or interstitial fluid**



Advancing Research on Treatment: Towards a Definition of Recovery from AUD

Recovery can be defined as a process through which an individual *maintains remission from AUD and cessation from heavy drinking*.

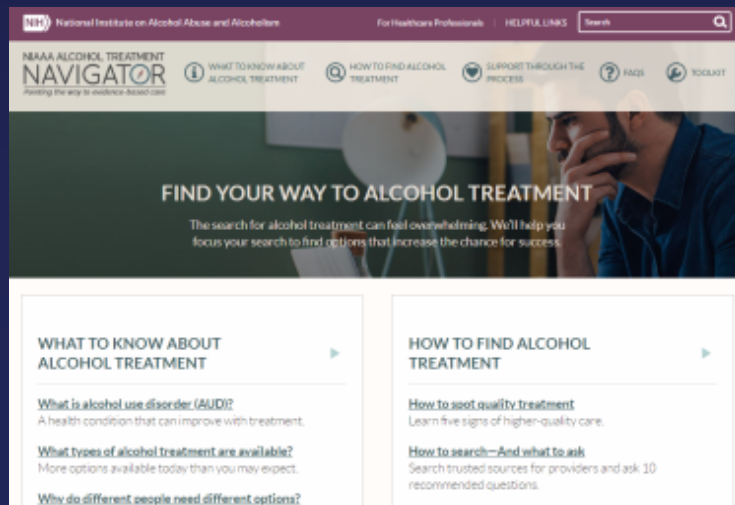
For those experiencing alcohol-related functional impairment and consequences, recovery is often characterized by fulfillment of basic needs, enhancements in social support and spirituality, and improvements in physical and mental health, quality of life functioning, and other dimensions of well-being.

Improvement in these domains may, in turn, promote continued recovery.

Ongoing and Future Efforts to Close the Treatment Gap: Expand Resources Directed at Healthcare Professionals

Updates to Alcohol Treatment Navigator

New portal to help healthcare professionals **build or expand their referral lists** to include providers offering up-to-date, science-backed AUD treatments that meet the varied needs of their patients



In Development: Core Resource for Healthcare Professionals

Modules include:

- Presentation in primary care
- Role in common co-occurring conditions
- Neuroscience
- Diagnostic criteria, recommended drinking limits
- Evidence-based therapies/medications
- Addressing stigma
- Interactions with commonly used medications

Questions Regarding the Clinical Relevance/Implications of Research Areas and Initiatives from NIAAA

- **Would a real-time, wearable biosensor for measuring blood alcohol levels be of clinical value?**
- **Would a general consensus definition of recovery facilitate research on recovery from alcohol use disorder?**
- **Would a core resource of evidence-based information about alcohol be of use to the addiction community?**

Thank You!

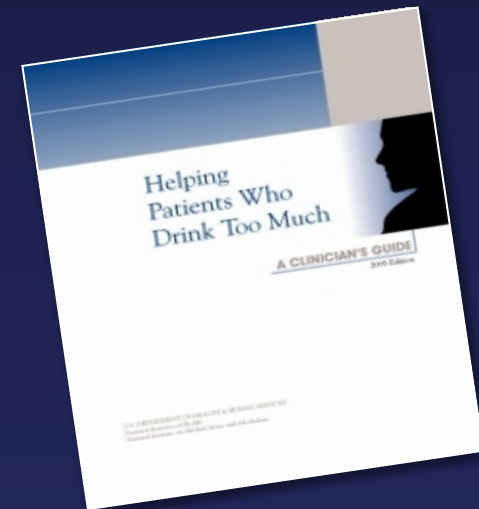
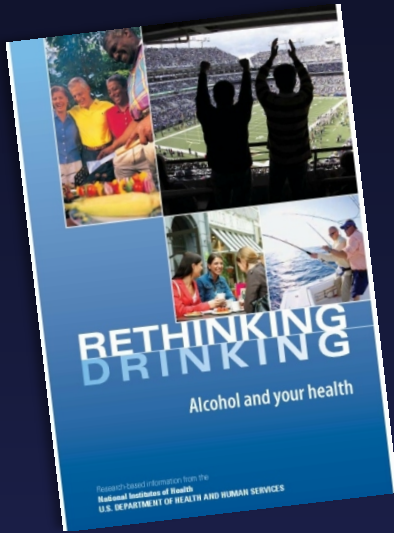
Special Thanks:

Rachel Anderson

Aaron White

Patricia Powell

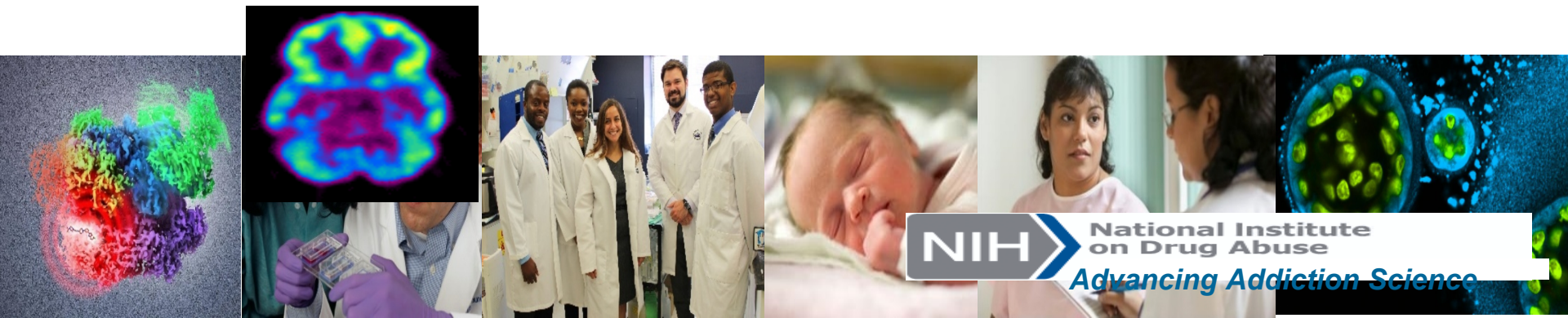
Bridget Williams-Simmons



Bridging the Gap: National Institute on Drug Abuse (NIDA) Perspectives

ASAM 51st Annual Meeting
April 2020

Geetha Subramaniam, MD, DFAACAP, DFAPA
National Institute on Drug Abuse



NIH National Institute
on Drug Abuse
Advancing Addiction Science

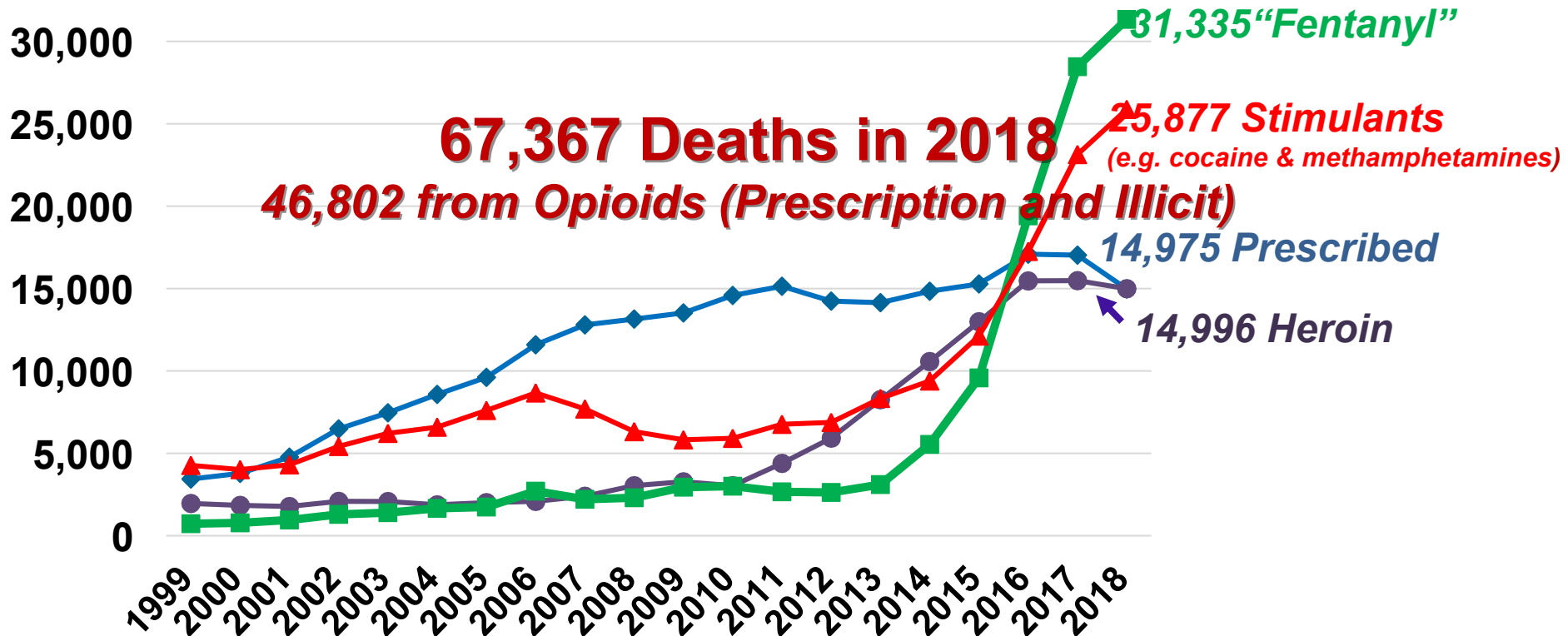
Disclosure Information

Geetha Subramaniam, MD,
DFAACAP, DFAPA

No disclosures.

Evolution of Drivers of Overdose Deaths:

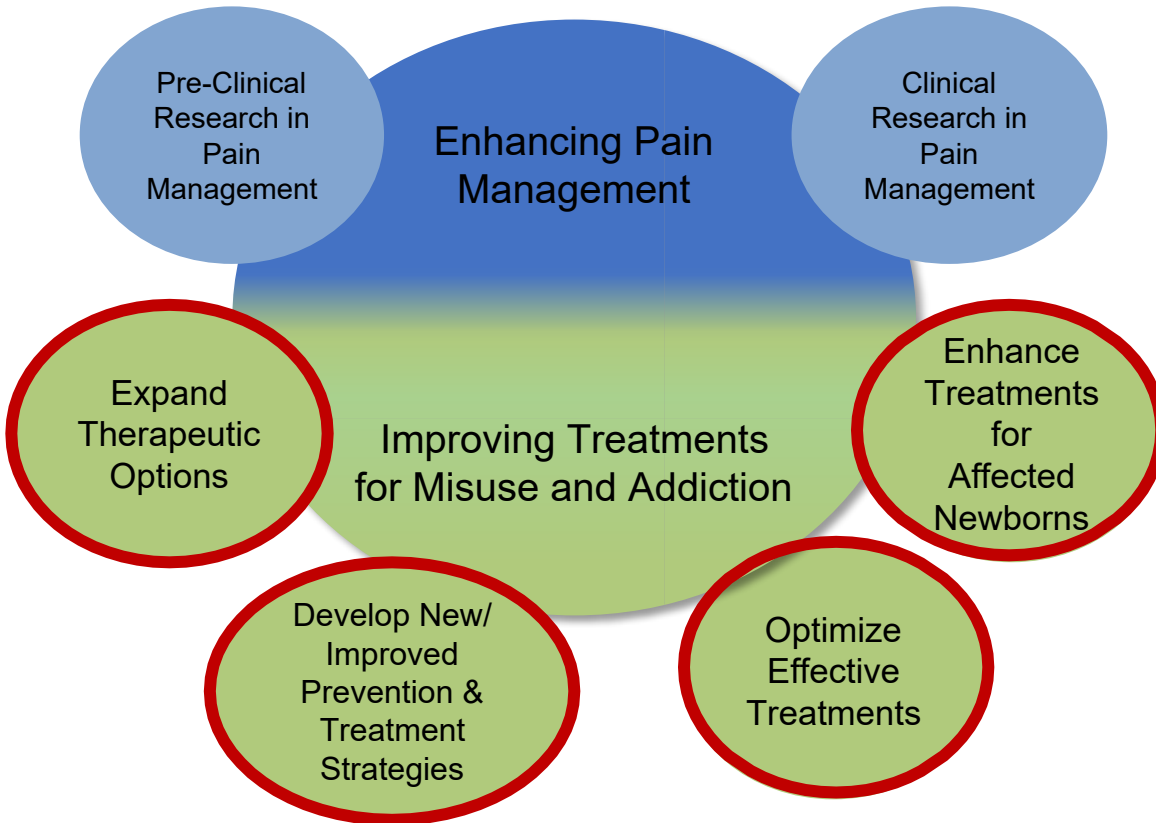
Analgesics ➡ **Heroin** ➡ **“Fentanyl”** ➡ **Stimulants**



See: Compton WM & Jones CM, Ann NY Acad Sci, 2019;

Updated for 2018 from WONDER Database and Hedegaard et al. NCHS Data Brief, no 356. January, 2020

HEAL Initiative Research Overview



- Scientific solutions to the opioid crisis
- \$500M/year effort
 - > \$945M obligated in FY2019
 - 40+ funding opportunity announcements
 - 41 states
 - 400 Investigators
 - 12 NIH Institute and Centers

Improving Prevention and Treatment for Opioid Misuse and Addiction



Priority Research Areas:

Expand Therapeutic Options

Optimize Effective Treatment Strategies

Develop New/Improved Prevention & Treatment Strategies

Enhance Treatments for Infants with NAS/NOWS

Research Opportunities:

- New formulations
- Longer duration
- Respiratory depression
- Immunotherapy
- New targets and approaches

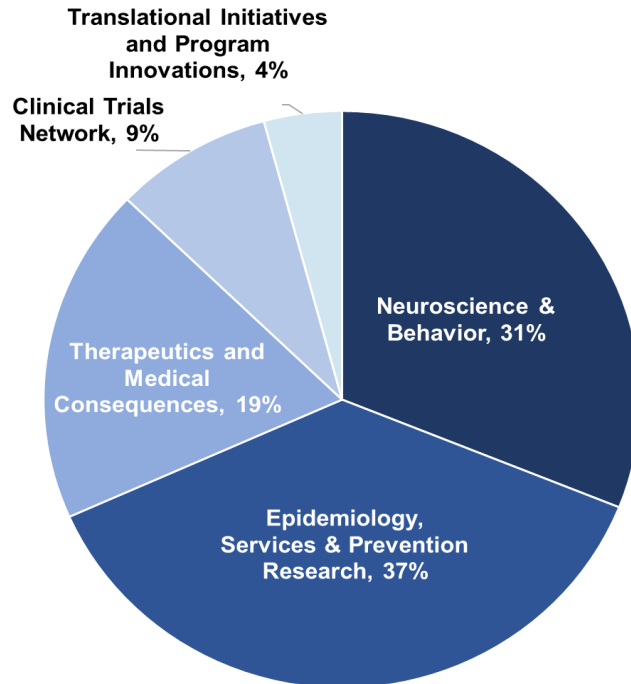
- Clinical trials Network expansion
- Criminal justice innovation (JCOIN)
- Behavioral interventions
- Multi-site implementation (HEALing Communities Study)

- Transition to adulthood
- Sleep dysfunction
- Preventing mod OUD
- Optimal length of Tx
- Collaborative care

- Advancing ACT NOW
- Cognitive development of opioid-exposed infants (HBCD)



FY 19 Extramural Research Funding*



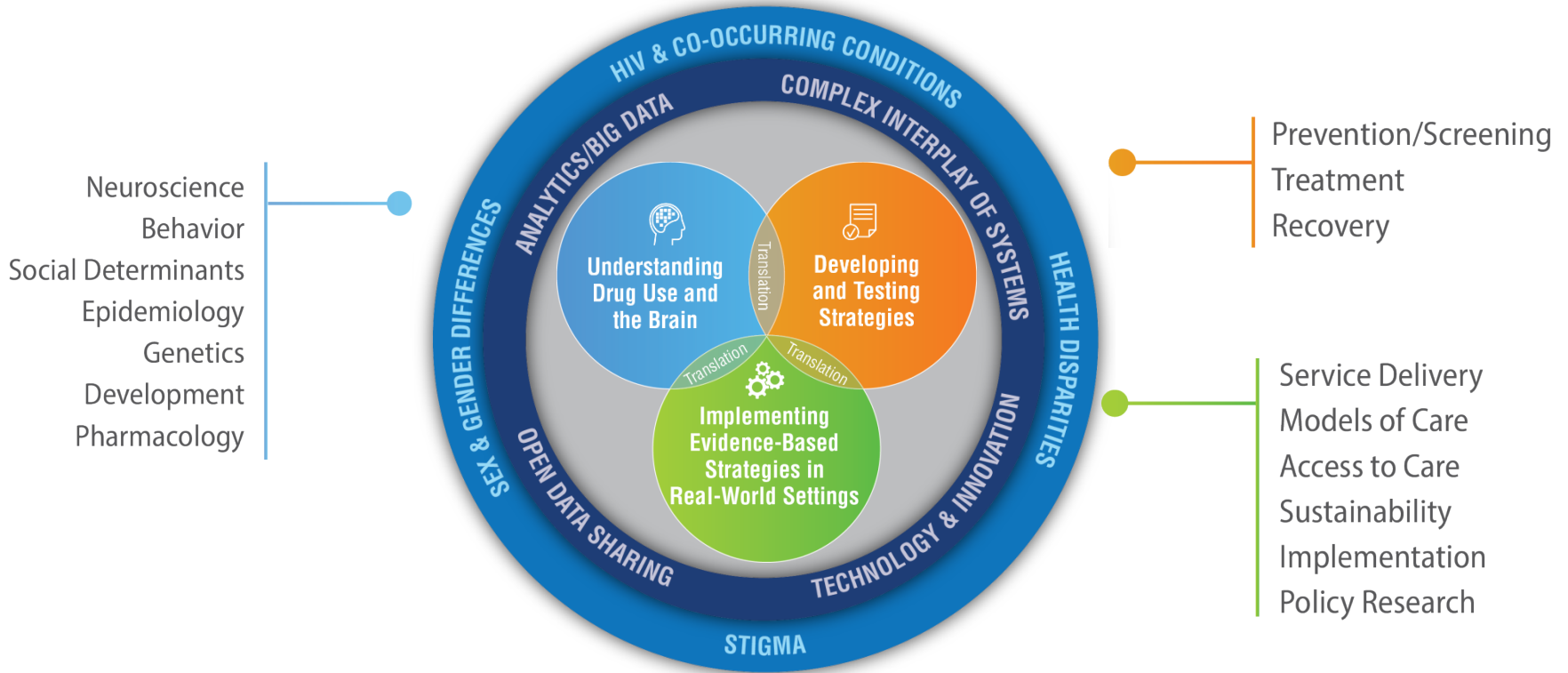
Select Program Announcements:

- **Basic Science** (NOSI DAT18-04: Effects of Cannabis Use and Cannabinoids on the Developing Brain)
- **HIV** (RFA-DA-20-022: Assessing the Effects of Cannabinoids on HIV-Induced Inflammation)
- **Medication Development:** (RFA-DA-18-020: Translational Avant-Garde Award for Development of Medication to Treat SUD)
- **Services** (NOSI NOT-DA-19-037: Health Services and Economic Research on the Treatment of Drug, Alcohol, and Tobacco Use Disorders)

**Includes HEAL 1-year funds provided in FY 19 and balance of HEAL 2-year funds provided in FY 18*



NIDA Strategic Plan 2021-2025



Neuroscience
 Behavior
 Social Determinants
 Epidemiology
 Genetics
 Development
 Pharmacology

Prevention/Screening
 Treatment
 Recovery

Service Delivery
 Models of Care
 Access to Care
 Sustainability
 Implementation
 Policy Research

STEWARDSHIP

- Research Training
- Workforce Diversity
- Dissemination
- Collaboration
- Infrastructure Development
- Rigor and Reproducibility

Questions for ASAM:

- 1. What are the biggest evidence gaps in treating addiction?*
- 2. How can NIDA make its research more accessible?*
- 3. How might we better engage clinicians and patients to inform research?*
- 4. What are your suggestions for highest priority for NIDA's next strategic plan? (2021-2025)*

AHRQ research priorities for addressing opioid and other substance use disorders

Elisabeth Kato, MD, MRP

Agency for Healthcare Research and Quality



Disclosure Information

☀ Elisabeth Kato, MD, MRP

☀ No disclosures.

☀ My presentation does not necessarily represent the views of AHRQ or the U.S. Department of Health and Human Services (DHHS); therefore, do not interpret any statement in this presentation as an official position of AHRQ or of DHHS.

AHRQ's main research priorities for substance use disorders

1. Quantifying healthcare utilization and patient outcomes related to substance use
 - ☀ HCUP, MEPS, CHSP
2. Identifying effective interventions
 - ☀ Evidence reviews, support for USPSTF guidelines
3. Learning how to implement effective interventions
 - ☀ MAT for OUD grants, Unhealthy Drinking in Primary Care grants, Health Care Delivery System and Opioids SEN

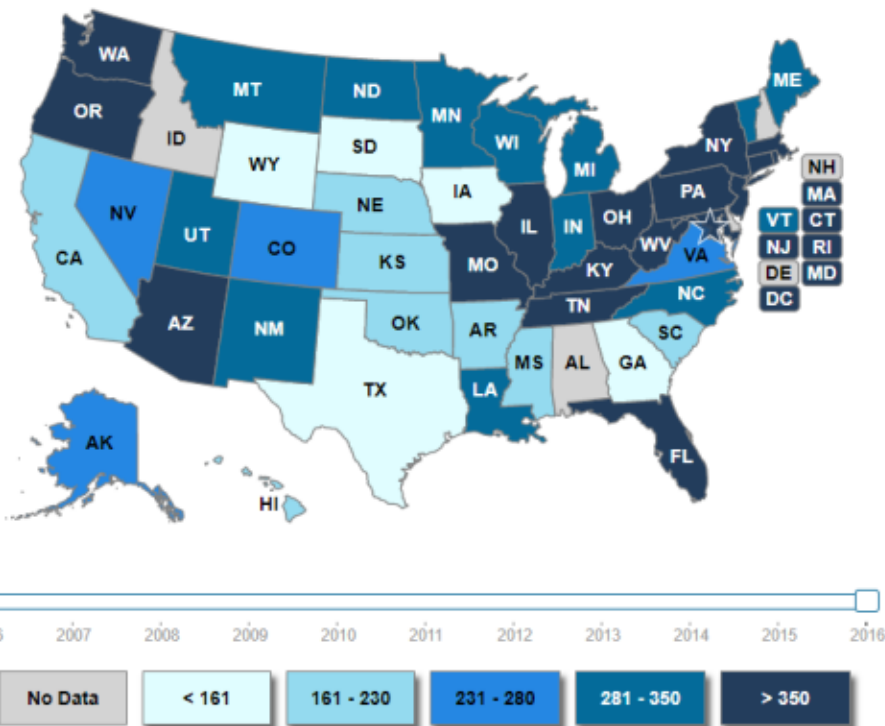
For more information on AHRQ funding opportunities visit
<http://www.ahrq.gov/funding/index.html>



Quantifying healthcare utilization and patient outcomes

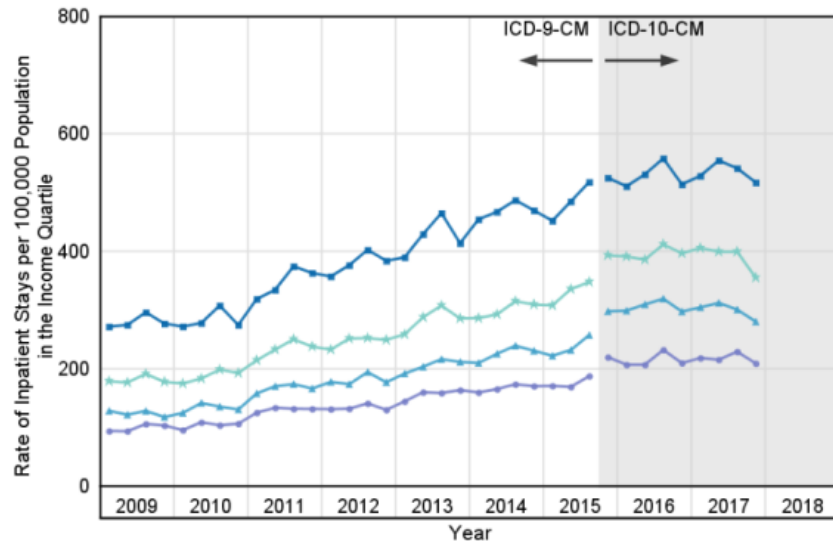
Rate of Opioid-Related Inpatient Stays per 100,000 Population

2016 National rate: 296.9



<https://www.hcup-us.ahrq.gov/faststats/OpioidUseMap>

Pennsylvania: Opioid-Related Hospital Use by Community-Level Income Rate of Inpatient Stays



Source: Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), State Inpatient Databases (SID) 2009-2017 (all available data as of 03/22/2019). Inpatient stays include those admitted through the emergency department.

Identifying effective interventions



Agency for Healthcare Research and Quality
Advancing Excellence in Health Care

About News

Effective Health Care Program

EHC Progra

Health Topics Products Consumers Research Methods & Tools Get Involved

Home » Products » Interventions for the Treatment of Substance Use Disorders in Adolescents » Research Protocol

Interventions for Substance Use Disorders in Adolescents: A Systematic Review

RESEARCH PROTOCOL | October 29, 2018

Download PDF 244.6 KB



<https://effectivehealthcare.ahrq.gov/>

<https://www.uspreventiveservice.org/taskforce.org/uspstf/>



U.S. Preventive Services
TASK FORCE

Search the USPSTF Site

Text size: Subscribe

HOME

RECOMMENDATIONS

PUBLIC COMMENTS & NOMINATIONS

NEWS

ABOUT THE USPSTF

Home > In Progress > Illicit Drug Use, Including Nonmedical Use of Prescription Drugs: Screening

Illicit Drug Use, Including Nonmedical Use of Prescription Drugs: Screening

An Update for This Topic is In Progress

LAST UPDATED: Aug 13, 2019



Learning how to implement effective interventions

The Academy
Integrating Behavioral Health and Primary Care

Academy Search

Home About Products Expert Insight News & Events Academy Community

Products

MAT for OUD Playbook

► MAT for OUD Playbook

- Introduction to MAT
- Self-Assessment Checklist for MAT for OUD
- Plan To Integrate MAT for OUD in Your Ambulatory Care Setting
- Obtain Training & Support for Providers & Staff
- Implement MAT for OUD
- Monitor Patient & Program Progress
- What Not To Do
- Frequently Asked Questions (FAQs)
- About the Playbook

Medication-Assisted Treatment for Opioid Use Disorder Playbook

Purpose

The AHRQ Academy developed the Medication-Assisted Treatment for Opioid Use Disorder Playbook (referred to as the MAT for OUD Playbook), a practical guide for implementing MAT in primary care and other ambulatory care settings. While the Playbook aims to help providers in rural primary care, the information in the Playbook should apply to other ambulatory care settings. This interactive, web-based product has the latest guidance, tools, and resources that address key aspects of implementation.

The MAT for OUD Playbook aims to address the growing need for guidance as more primary care practices and health systems begin to implement MAT. The Playbook's framework is designed to be useful for practices implementing any array of MAT services.

[Start the Playbook >](#)

The Academy
Integrating Behavioral Health and Primary Care

Academy Search

Home About Products Expert Insight News & Events Academy Community

Products > Opioid & SU Resources > MAT Tools & Resources

MAT Tools & Resources

Welcome Guide **MAT Collection**

A collection of tools and resources for providers, staff, and patients who offer or use medication-assisted treatment (MAT) services.

Browse

A curated selection of useful tools and resources.

As part of an [environmental scan](#), a variety of tools and resources has been assembled for use in the implementation of MAT.

[Browse Collection >](#)

Tool Finder

What do you need tools for?

- Opioid Use Disorder Awareness and Education
- Prevention of Opioid Use Disorder
- Training and Education About MAT
- Implementation of MAT in Ambulatory Care
- Overdose

<https://integrationacademy.ahrq.gov/>

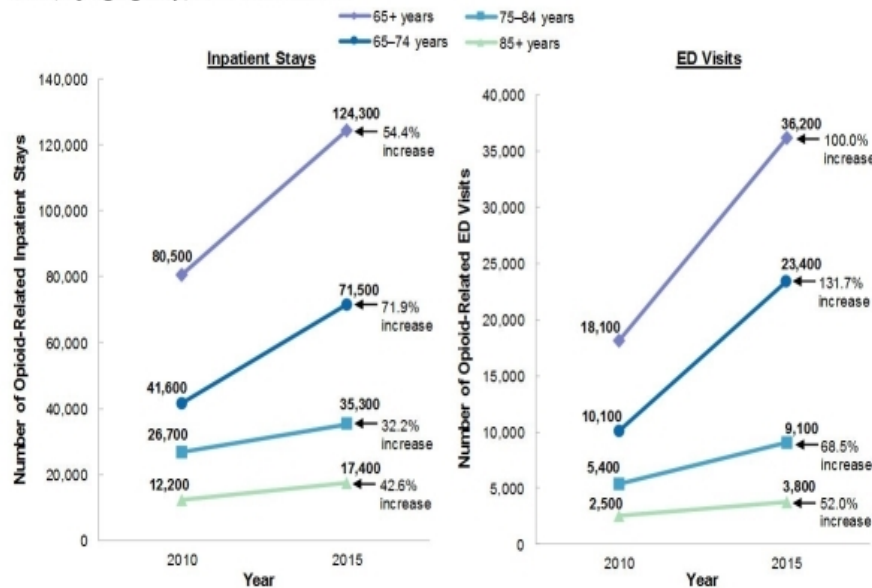


#ASAM2020

AHRQ Opioids and Older Adults Initiative

Rising hospitalizations and emergency department visits

Figure 1. Number of opioid-related inpatient stays and ED visits among patients aged 65 years and older, by age group, 2010 versus 2015



→ Three-pronged strategy

1. **Evidence Map:** Prevention, diagnosis, and management of opioids, opioids misuse, and OUD in older adults
2. **Quality Improvement Pilot:** Identifying and testing strategies for management of opioid use and misuse in older adults in primary care practices
3. **Health Systems Research:** Improving the management of opioids and OUD in older adults (R18)

www.hcup-us.ahrq.gov/reports/statbriefs/sb244-Opioid-Inpatient-Stays-ED-Visits-Older-Adults.pdf

Questions for the audience

- ☀️ What research questions around evidence, practice improvement, and healthcare systems should be a priority for AHRQ?
- ☀️ What kinds of information/practice support/tools and resources would make your work more effective?
- ☀️ What kind of digital resource capabilities are most needed to enhance patient care?
- ☀️ What are the greatest needs/most successful approaches to managing OUD in older adults?

www.ahrq.gov/opioids

Thank you!



ASAM Science Initiative

ASAM Science Initiative Subcommittee Co-Chairs:

Ken Freedman, MD, MS, MBA, FACG, AGAF, DFASAM

Tami Mark, PhD, MBA



Disclosure Information

☀ Ken Freedman, MD, MS, MBA, FACP, AGAF, DFASAM

☀ No disclosures

☀ Tami Mark, PhD, MBA

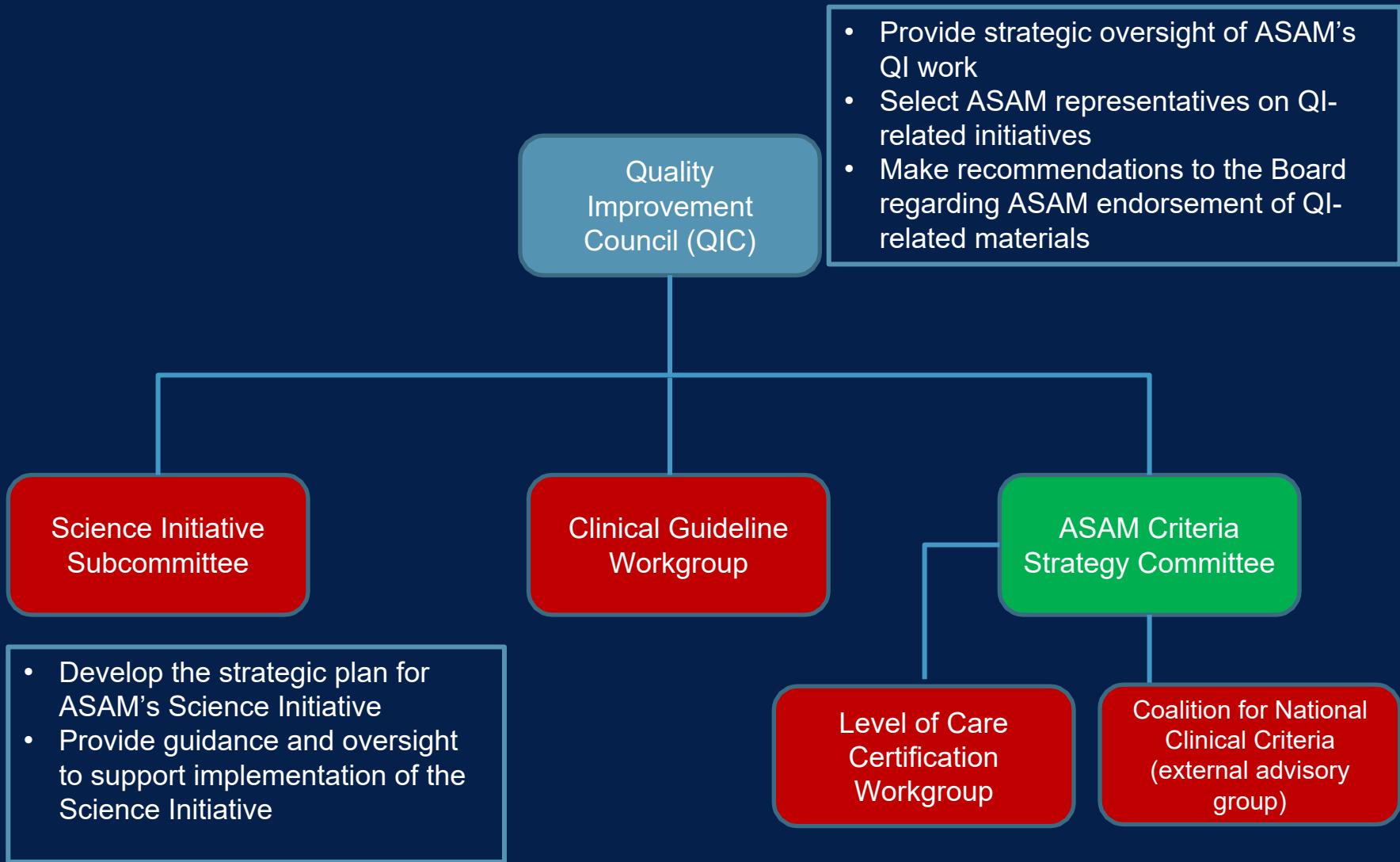
☀ No disclosures

ASAM Science Initiative Vision

- ☀️ Provide support to ASAM members engaged in scientific research or who want to become engaged in research; and
- ☀️ Promote gathering more evidence to support quality improvement in medical care for substance use disorders.

Near-term Science Initiative Goals

- ☀️ Develop strategic plan for ASAM's Science Initiative;
- ☀️ Collect data from ASAM members on involvement and interest in scientific research related to addiction medicine services;
- ☀️ Invite more clinician-scientists and research scientists to join ASAM; and
- ☀️ Grow the Science Initiative Subcommittee



Science Initiative Subcommittee (Current)

- ☀ Ken Freedman, MD, MS, MBA, FACP, AGAF, DFASAM (Co-Chair)
- ☀ Tami Mark, PhD, MBA (Co-Chair)

- ☀ Anika Alvanzo, MD, MS, FACP, DFASAM
- ☀ Miriam Komaromy, MD, FACP, DFASAM
- ☀ Sandrine Pirard, MD, PhD, MPH, FAPA, FASAM
- ☀ Rich Saitz, MD, MPH, FACP, DFASAM
- ☀ Peter Selby, MBBS, CCFP, FCFP, MHSc, DFASAM
- ☀ Melissa Weimer, DO, MCR, FASAM
- ☀ Aleksandra Zgierska, MD, PhD, DFASAM

Join Us!

Email: Anna Pagano, PhD (ASAM Director of Science):

apagano@asam.org

Email: Tami Mark, PhD, MBA (Science Initiative Co-Chair; Senior Research Scientist):

tmark@rti.org

Email: Ken Freedman, MD, MS, MBA, FACG, AGAF, DFASAM (Science Initiative Co-Chair; Quality Improvement Council Chair)

kifreedman@verizon.net

www.asam.org/ScienceInitiative



#ASAM2020