



- Be smart.
- Be safe.
- Be sure.**

A Public Health Advocacy Program from the Pennsylvania Medical Society

TESTIMONY OF  
SCOTT SHAPIRO, MD

ON BEHALF OF THE  
PENNSYLVANIA MEDICAL SOCIETY

BEFORE THE  
HOUSE POLICY COMMITTEES AND THE HOPE CAUCUS

ON THE OPIOID AND HEROIN EPIDEMIC

AUG. 15, 2016

Good afternoon. My name is Dr. Scott Shapiro. I am the current President of the Pennsylvania Medical Society (PAMED) and a practicing cardiologist in Montgomery County. On behalf of PAMED and the physicians, residents, and medical students we represent, thank you for inviting me to testify today regarding our state's opioid and heroin abuse crisis.

This is an issue of particular interest to PAMED. There's no question that we're dealing with a prescription drug abuse crisis in Pennsylvania. Unfortunately, it appears that the problem may get worse before it gets better. A recent report from the DEA indicated that 3,383 Pennsylvanians died of a drug related overdose last year— up 23.4% from 2014.

Yet there are also some small signs of progress. According to data from IMS Health, there was a 9 percent decrease in the number of opioid prescriptions written in Pennsylvania from 2013 to 2015. But, there's still more work to be done. And, as physicians, we also need to empower our patients to ask the right questions and set realistic expectations for pain management.

As physicians, we see firsthand the destruction that occurs when a patient overdoses on pain medication. We share the tragedy of seeing a parent searching for answers as to why their children, wanting to kick their heroin addiction, cannot find an open inpatient detox bed. Our colleagues in addiction and emergency medicine have been fighting this epidemic on a daily basis across the commonwealth for decades. We are extremely grateful for their dedication to our patients, our families, and those individuals still in need of treatment for their substance use needs.

While there is a clear need to act aggressively in response to this epidemic, we must also act prudently, because prescription opioid medications are an essential tool for physicians who treat patients who are living with chronic pain. Striking that delicate balance between appropriately prescribing for pain and ensuring that misuse, abuse, and diversion does not occur has guided our approach to addressing this public health crisis.

I would like to focus a majority of my time today in highlighting PAMED's overall multipronged approach to the opioid issue.

### **Opioids for Pain: Be Smart. Be Safe. Be Sure. initiative:**

On May 17, 2016, PAMED unveiled its *Opioids for Pain: Be Smart. Be Safe. Be Sure.* public health initiative. PAMED's Opioid Day began at the Capitol, where PAMED physician leaders met with members of the state legislature about this new campaign. At the end of the day, physician leaders heard important presentations from experts, such as Department of Drug and Alcohol Programs' (DDAP) Secretary Gary Tennis on the importance of warm handoffs at time of inpatient treatment; Physician General Dr. Rachel Levine on prescribing guidelines and naloxone; and Dr. Patrice Harris, chair of the American Medical Association Board of Trustees, on national efforts to fight this epidemic.

The goal of the day was to show how Pennsylvania physicians are taking steps to address opioid misuse and abuse and highlight the ways that the physician community is working with partners to prevent opioid abuse while also effectively treating pain and meeting the needs of patients and their families.

The Be. Smart. Be Safe. Be Sure. initiative is based on a two-part strategy: patient empowerment and physician call-to-action.

As physicians, our action steps include:

1. Knowing the prescribing guidelines.
2. Using the Prescription Drug Monitoring Program (PDMP) once it is up and running later this month.
3. Referring patients who have a substance use disorder to treatment.
4. Discussing alternatives to opioids with patients.
5. Asking patients to keep their pills safe, and properly dispose of a prescribed medication when they no longer need it

## **PAMED Opioid Task Force**

Dr. John Gallagher, an obstetrician/gynecologist from Sharon, Pa., guides our opioid task force. Composition of this important group includes physicians from the fields of anesthesia, emergency medicine, family medicine, internal medicine, obstetrics/gynecology, oncology, orthopedics, pain management, preventive/occupational medicine, and psychiatry. This task force meets on a regular basis to discuss and plan initiatives related to opiate and heroin misuse, abuse, and diversion. The task force welcomes the opportunity to continue to collaborate with the legislature and other key stakeholders on this important issue.

Activities taken on by this group within the past few years include:

- Actively involved in the development of several specialty-specific state prescribing guidelines.
- Reviewing and commenting on the Centers for Disease Control and Prevention's (CDC's) clinical guidelines unveiled in early February.
- Development of a grassroots advocacy program between county and specialty medical societies.
- Leading discussions with representatives from the Lancaster County District Attorney's office, school districts, local hospital officials, state associations for other prescribers, local legislators, and the Lancaster County Medical Society to create educational modules for use in schools that will serve as a pilot for use across the commonwealth.
- Working with the Pennsylvania Department of Health (DOH) and the deans of Pennsylvania medical schools on opioid/core competency curriculum for medical students. We would like to express our gratitude to the leadership at DOH for their participation in this important endeavor.
- Creation of a workgroup comprised of PAMED, specialty medical organizations, and state associations of other prescribers to discuss how we can work together to collaboratively fight this epidemic.
- Working with DOH to promote the use of the PDMP as its unveiled later this month. The PDMP will give Pennsylvania physicians an important tool to help identify patients who may be bouncing from physician to physician looking to score prescription drugs, and talk to patients about addiction as well as treatment options.
- Working with DOH and DDAP to advocate for the increased use of naloxone, which as of July 7, has saved the lives of 1,080 Pennsylvanians. Every life is worth saving, so increased access is a top priority.

## **The Importance of Education**

PAMED continues to take the lead in educating physicians and their health care teams on addiction issues. Our online continuing medication education series includes training on the state prescribing guidelines, the use of naloxone, referral to treatment, and the PDMP. Additional educational offerings in the works include the importance of the warm hand-off in inpatient substance use treatment and alternative treatment therapies. Current resources are available at [www.pamedsoc.org/OpioidResources](http://www.pamedsoc.org/OpioidResources).

## **Next Steps**

Of course, much remains to be done. Reducing opioid abuse requires a comprehensive and collaborative effort by all stakeholders — organized medicine, law enforcement, family members, and local and state government — to be effective. We remain committed to providing our clinical experience to work with members of this committee, House and Senate leadership, the Administration, and other interested stakeholders to effect change across the commonwealth for those suffering from substance use and to assist families as they struggle for hope to end this public health crisis.

PAMED's Be Smart. Be Safe. Be Sure. initiative is only successful if the information is shared with all Pennsylvanians, including physicians, patients, and legislators. During Opioids Day, all Pennsylvania legislators received a toolkit that contained tear-off and poster for their offices, as well as a flyer on how they can help educate and protect patients in their districts. Materials were also distributed to Pennsylvania physicians. For more information, visit PAMED's website at [www.pamedsoc.org/OpioidInfo](http://www.pamedsoc.org/OpioidInfo).

As my colleague Dr. David Talenti, PAMED Board Chair stated, "if physicians don't suit up for the battle, who will? Education is a silver bullet. We need to make sure that we are doing everything we can to stop this wave of abuse, and empowering our patients to do the same."

Pennsylvania is known as the "State of Independence," but when it comes to opioids, Pennsylvania has become the "State of Dependence." We have come to rely too heavily on using opioids for pain. Patients in pain deserve care and compassion. There are times when an opioid is the appropriate choice. But, physicians need to think twice when writing an opioid prescription, and patients should not expect a prescription every time they experience pain. When it comes to opioids for pain, we all need to be smart, be safe, and be sure about using them, and using them correctly.

Thank you for your time. I am available to answer any questions or address your concerns at this time.