# Drug Abuse and Addiction in America: Challenges and Opportunities

Kurt Rasmussen, Ph.D.
Director
Division of Therapeutics and
Medical Consequences
National Institute on Drug Abuse

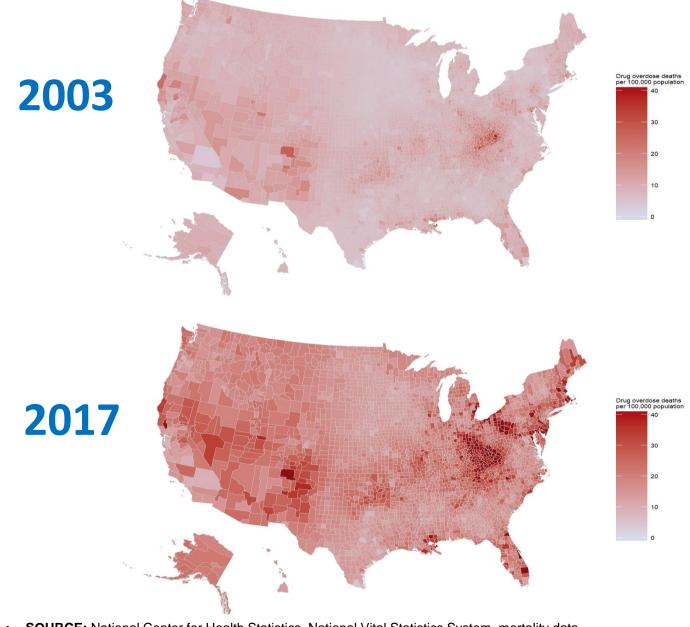


### Disclosures

No disclosures

# THE CRISIS: NATIONAL OVERDOSE DEATH RATES

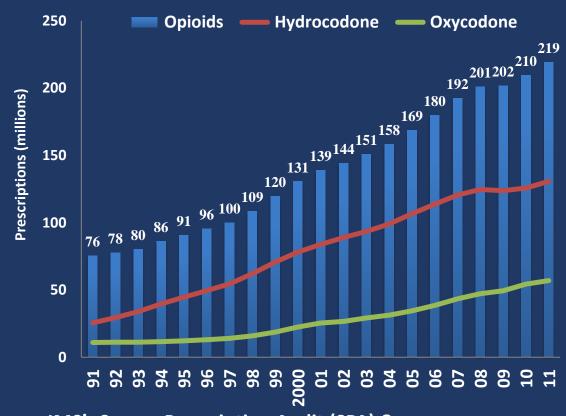
IN 2017, THERE WERE 70,237 OVERDOSE DEATHS (9.6% HIGHER THAN 2016)



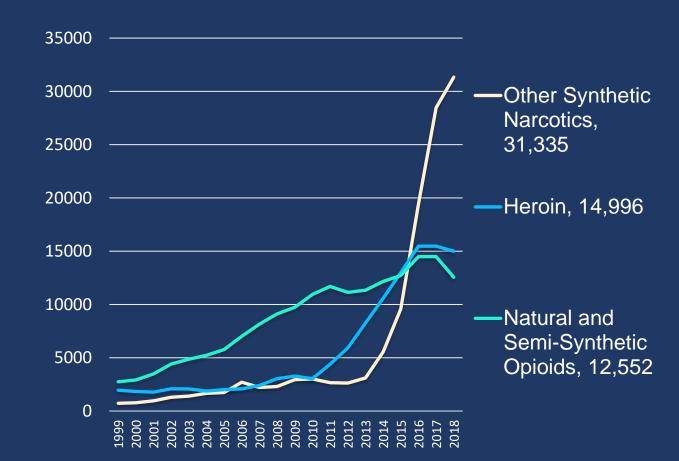
- **SOURCE:** National Center for Health Statistics, National Vital Statistics System, mortality data (http://www.cdc.gov/nchs/deaths.htm).
- SUGGESTED CITATION: Rossen LM, Bastian B, Warner M, Khan D, Chong Y. Drug poisoning mortality: United States, 2003–2017. National Center for Health Statistics. 2019. (Available from: <a href="https://www.cdc.gov/nchs/data-visualization/drug-poisoning-mortality/">https://www.cdc.gov/nchs/data-visualization/drug-poisoning-mortality/</a>).

### Opioid Prescriptions: 1991-2011

### Waves Opioid Crisis: Overdose Fatalities



IMS's Source Prescription Audit (SPA) & Vector One®: National (VONA)



### HELPING to END ADDICTION LONG-TERM SM (HEAL) Initiative

Advance Effective
Treatments For
Pain Through
Clinical Research

Expand
Therapeutic
Options

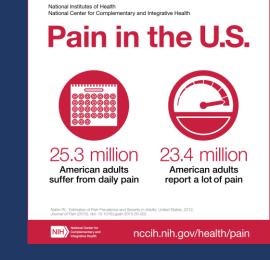
ENHANCING PAIN MANAGEMENT

IMPROVING
TREATMENTS
FOR MISUSE AND
ADDICTION

Develop New and Improved Prevention & Treatment Strategies

Accelerate
Discovery And
Development Of
Pain Treatments

Enhance
Treatments for
Infants with
NAS/NOWS



Optimize
Effective
Treatments

# THE CRISIS: NATIONAL OVERDOSE DEATH RATES

IN 2017, THERE WERE 70,237 OVERDOSE DEATHS (9.6% HIGHER THAN 2016)

### **NIH HEAL Initiative**

Improving Prevention and Treatment for Opioid Misuse, OUD and Overdoses

Expand
Therapeutic
Options

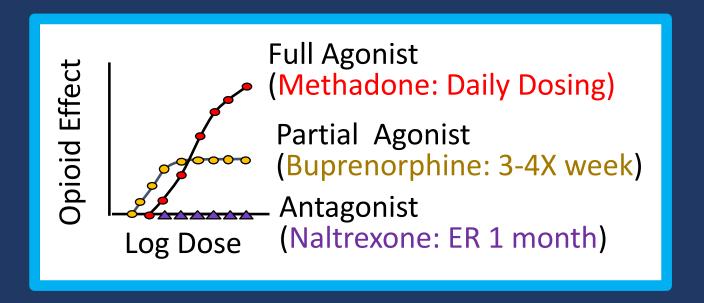
Prevention

Implementation
Science

Knowledge Gaps

Source: https://www.cdc.gov/nchs/data-visualization/drug-poisoning-mortality/index.htm

# Medications for Opioid Use Disorder (MOUD)



### **DECREASES**

OPIOID USE
OPIOID-RELATED
OVERDOSE DEATHS
CRIMINAL ACTIVITY
INFECTIOUS DISEASE
TRANSMISSION

### **INCREASES**

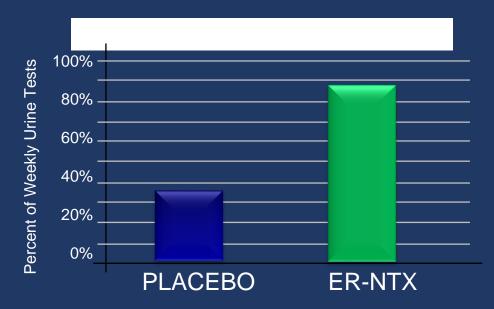
SOCIAL FUNCTIONING
RETENTION IN
TREATMENT

### Extended Release (ER) Formulations Facilitate Use in Health Care & Justice Settings and Improve Compliance

### **Mu Antagonist: NALTREXONE**



Once-month Injection



Placebo: N=124 ER-NTX: N=126 **Mu Partial Agonist: BUPRENORPHINE** 

SUBLOCADE™

(Buprenorphine ER), Once-Month Injectable FDA Approval 11.30.2017



**CAM2038** 

Subcutaneous
Buprenorphine ER:
Once-Week Injection
Once-Month Injection



PROBUPHINE®

6 months implant



Krupitzky et al., Lancet 2011

### OUD pipeline <u>BEFORE</u> HEAL

Early Preclinical Time to Launch: >12 yrs		Late Preclinical 10-12 yrs	Phase I 6-10 yrs	Phase Ib 5-9 yrs	Phase II 4-6 yrs	Phase III 3-5 yrs	New Formulatio <3 yrs	New Formulation <3 yrs	
			ANS6637 ALDH2 inhibitor	$\begin{array}{l} \textbf{Guanfacine} \\ \alpha \textbf{2} \text{ adren} \\ \textbf{agonist} \end{array}$					
			C4X3256 OX-1 antagonist	Ketamine NMDA antagonist					
		Mor, Her, Oxy, Hydro vaccine	Semiglutide GLP-1R agonist						
Oxy/Fentanyl nano-vaccine			Cannabidiol	Lorcaserin 5HT2c agonist					
Fentanyl vaccine		Heroin Vaccine	Tradipitant NK-1 antagonist	Gabapentin VDCC blocker					
Heroin/Fent vaccine							<b>Naloxo</b> Hi-dose spray		
Fentanyl mAb									

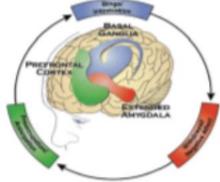
### OUD pipeline <u>AFTER</u> HEAL

Early Preclinical Time to Launch: >12 yrs		Late Preclinical 10-12 yrs		Phase I 6-10 yrs	Phase Ib 5-9 yrs	Phase II 4-6 yrs	Phase III 3-5 yrs	New Formulation <3 yrs	
DM24 MOR/DOR het antagonist	SBI-553 NT-1 biased PAM	ITI-333 MOR PA/5HT2a antagonist	KLS13019 CBD analogue	ANS6637 ALDH2 inhibitor	Guanfacine α2 adren agonist	Pregab + Lofex VDCC inh/α2 agonist		<b>Olani</b> 6 mo naltr implant	<b>LAAM</b> Oral, re-intro
PZM21 MOR biased agonist	NAN/NAQ MOR modulator	Nalmefene implant MOR antag	PF5190457 GHS1 $\alpha$ R antag	C4X3256 OX-1 antagonist	Ketamine NMDA antagonist			BICX102 3 mo naltr implant	Naltrexone 1 yr implant
MOR biased agonist	GPR151 antagonist	NORS-033 Nalmefene prodrug	Mor, Her, Oxy, Hydro vaccine	Semiglutide GLP-1R agonist	Suvorexant OX-1/2 antagonist			<b>OPNT003</b> Nasal nalmefene	Brixadi Bupr 1 wk/1 mo inj
Oxy/Fentanyl nano-vaccine	AT-121 NOP/MOR partial agonist	LYN-014 Long acting methadone	NYX-783 NMDA modulator	Cannabidiol	Lorcaserin 5HT2c agonist			Bupren/Nalox Oral, long acting	AP003 Mlt-dose nlx nasal spray
Fentanyl vaccine	PTPRD inhibitor	KNX100 Unknown mechanism	Heroin Vaccine	Tradipitant NK-1 antagonist	Gabapentin VDCC blocker			Naltrexone 2 mo injection	AP004 Nlx prefilled syringe
Heroin/Fent vaccine	R-methadone prodrug	AP007 Extd-release nalmefene	NP10697 GluN2B antagonist	AZD4041 OX-1 antagonist	ASP8062 GABA-B PAM			<b>Naltrexone</b> 6 mo implant	Naloxone Hi-dose nasal spray
Fentanyl mAb	Muscarinic M5 NAM							Nalmefene Transmucosal	
Metho- cinnamox MOR antag									

# **EXPAND** THERAPEUTIC OPTIONS: OUD

### ADDICTION CYCLE AND RELEVANT BRAIN REGIONS

Transcranial Magnetic Stimulation (TMS)



ct on

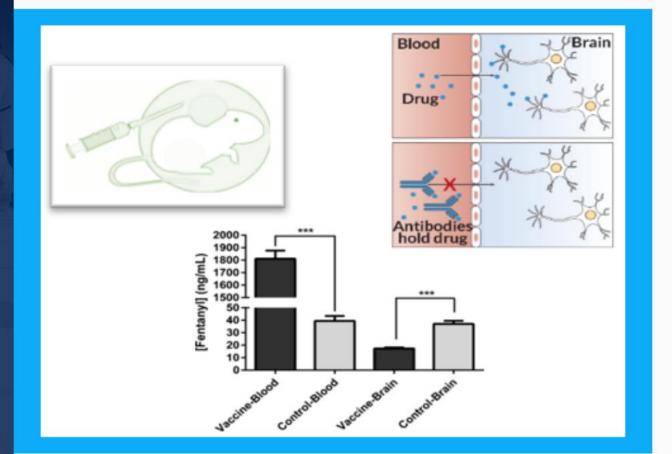
Transcranial Direct Current Stimulation (tDCS)

Deep Brain Stimulation (DBS)

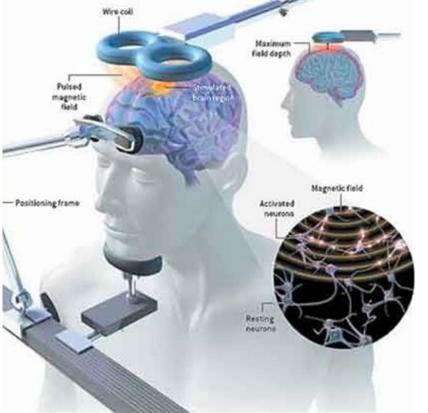
# EXPAND THERAPEUTIC OPTIONS: OUD

### **VACCINES AND IMMUNOTHERAPIES**

- Vaccines (fentanyl and analogues), heroin/morphine
- Reduced drug reaching brain
- Protection against overdose









**End Game** 

Ultimately, we anticipate multiple medications, integrated with devices and psychosocial interventions, employed in an orchestrated fashion, will be needed to achieve truly effective treatments tailored for maximal efficacy for induvial patients.



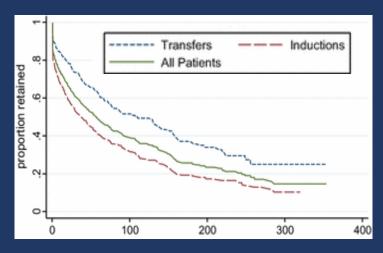


### Implementing MOUD in Healthcare Settings

### Emergency

## Primary Care: Low Threshold Office-Based Buprenorphine Treatment Unobserved induction

Unobserved induction, At most weekly visits, No psychosocial treatment.



 Treatment retention at 38 weeks equivalent to office-based opioid treatment.

### **Emergency department-initiated buprenorphine**

- Reduced self-reported illicit opioid use
- Increased engagement in treatment
- Decreased use of inpatient services

#### Self-Reported Illicit Opioid Use in the Past 7 Days



D'Onofrio G et al., JAMA April 28, 2015.

# IMPLEMENTING MEDICATIONS FOR OUD IN HEALTHCARE



- Optimizing Retention, Duration and Discontinuation MOUD
- Subthreshold OUD Trial
- ED-Initiated Buprenorphine
- MOUD for OUD Expecting Mothers
- Rural Expansion MOUD
- Hospital Initiation MOUD

### **CTN Node Expansion**



Appalachian Node –

Univ. of Pittsburgh & WV Univ.

**Great Lakes Node** –

**Rush University** 

**Greater Intermountain Node** –

Univ. of Utah

**Greater Southern CA Node –** 

UCLA

Southwest Node –

Univ. of New Mexico

# IMPLEMENTING MEDICATIONS FOR OUD IN JUSTICE SETTINGS

MOUD REDUCED
MORTALITY BY 75% IN
THE FIRST MONTH POST
RELEASE

18 States + Puerto Rico 88 communities >25,000 justice-involved individuals

### Justice Community Opioid Innovation Network Coun

Count of Communities

17



**Coordination and Translation Center:** George Mason University **Methodology and Advanced Analytics Resource Center:** University of Chicago

#### 13 Hubs

Each 5+ Communities

Cascade of Care Focus

Justice & Treatment Partner

Diversity of Justice Setting, Geography, and Intervention

### **Novel Studies**

STATE POLICY ROLLOUTS
LEVERAGING TECHNOLOGY
PEER NAVIGATION SUPPORT
INTER ORGANIZATIONAL
LINKAGES
MOUD COMPARATIVE
EFFECTIVENESS

# The HEALing Communities Study: Integrating Evidence Based interventions across Settings



#### Healthcare

- Primary care
- Emergency departments
- Inpatient hospital care
- Behavioral health

#### **Criminal Justice**

- Jails
- Prisons
- Parole/Probation
- Drug courts

#### Community

- Families
- Schools
- Police and fire departments
- Faith-based organizations
- Local industry

Ohio State University PI: Rebecca Jackson



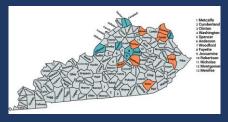
Boston Medical Center PI: Jeffrey Samet



Columbia University PI: Nabila El-Bassel



University of Kentucky PI: Sharon Walsh



#### 35000 30000 Other Synthetic Narcotics, 31,335 25000 Heroin, 14,996 20000 Cocaine, 14,666 15000 Natural and Semi-10000 Synthetic Opioids, 12,552 Methamphetamine, 5000 12,676 0 1999 2000 2001 2002 2003 2004 2006 2007 2008 2010 2011 2012 2013 2013 2014 2015 2015 2016 2017

### **OVERDOSE MORTALITY BY CLASS OF DRUG**

ADAPTED FROM NCHS STATISTICS

CDC National Vital Statistics System, January 15, 2020



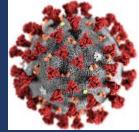
### OD Deaths: Provisional Data 3/ 2018 – 2/ 2019

Source: CDC National Vital Statistics System, September 12, 2019





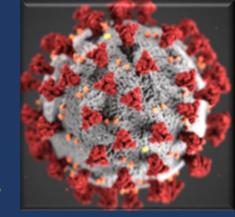
### Intersection between Opioid crisis and COVID-19





# COVID-19: Potential Implications for People with SUD

- SUD-related lung impairment may increase risk for serious effects from COVID-19 (smoking/vaping, opioids, methamphetamine)
- Stress on health systems may be a barrier to care for those with SUD
- Populations experiencing homelessness or incarceration at higher risk for SUD; may have increased exposure to COVID-19
- Difficulties in accessing medications (including methadone clinics)
- Restriction of community support system like syringe exchange programs
- Challenges of stress and social isolation to sustain recovery



## **COVID-19: Potential Implications for SUD Research**

- Lab closures
- IRB closures
- Halted recruitment/enrollment/patient interaction in clinical trials
- Healthcare system overwhelmed with clinical needs and research delayes
- Public health partners for HEALing Communities overwhelmed
- Researchers not permitted into correctional facilities

# Notice of Special Interest (NOSI) regarding the Availability of Administrative Supplements and Urgent Competitive Revisions for Research on the 2019 Novel Coronavirus Notice Number: NOT-DA-20-047

Key Dates

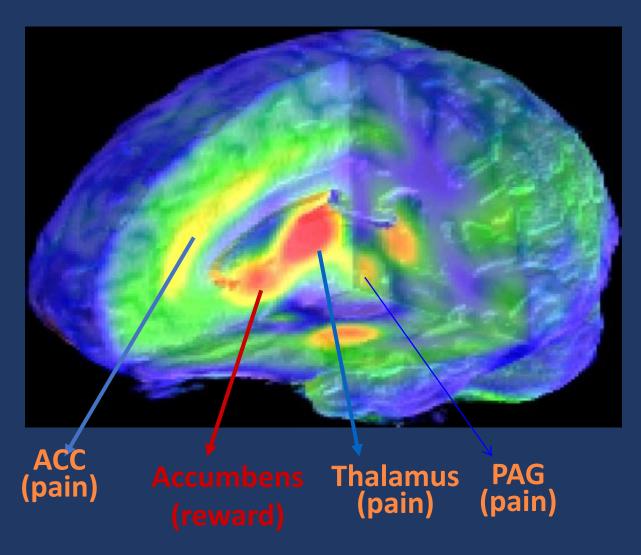
Release Date: March 19, 2020

First Available Due Date: March 19, 2020

Expiration Date: March 31, 2021

- Related Announcements
   <u>PA-18-935</u>Urgent Competitive Revision to Existing NIH Grants and Cooperative
   Agreements (Urgent Supplement Clinical Trial Optional)
   <u>PA-18-591</u> Administrative Supplements to Existing NIH Grants and Cooperative
   Agreements (Parent Admin Supp Clinical Trial Optional)
- Issued by National Institute on Drug Abuse (NIDA)
- Purpose
- NIDA is issuing this Notice of Special Interest (NOSI) to highlight the urgent need for research on the 2019 Novel Coronavirus (2019-nCoV, also known as COVID-19). NIDA is especially interested in research collecting and examining data on the risks and outcomes for COVID-19 infection in individuals suffering from SUD.

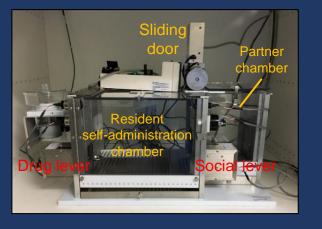
# **Analgesic & Reward Mechanisms of Mu Opiate Drugs (Heroin, Vicodin, Morphine)**



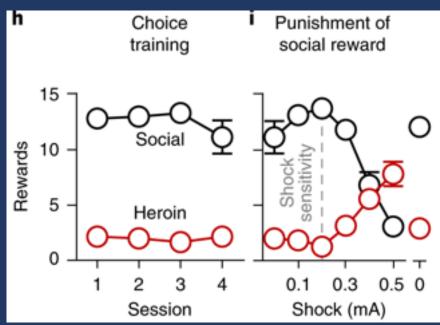
James Nachtwey. TIME Special Report

### Social Interaction Favored over Heroin Unless Social Interaction is Punished

HEROIN







### Plethora of new targets for pain therapy development

