



An Integrated Approach to Addressing Opioid Misuse, Addiction, and Overdose

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Services for the prevention and treatment of substance misuse and substance use disorders have traditionally been delivered separately from other mental health and general health care services. Because substance misuse has traditionally been seen as a social or criminal problem, prevention services were not typically considered a responsibility of health care systemsi; and people needing care for substance use disorders have had access to only a limited range of treatment options that were generally not covered by insurance. Effective integration of prevention, treatment, and recovery services across health care systems is key to addressing substance misuse and its consequences and it represents the most promising way to improve access to and quality of treatment. Recent health care reform laws, as well as a wide range of other trends in the health care landscape, are facilitating greater integration to better serve individual and public health, reduce health disparities, and reduce costs to society.

KEY COMPONENTS OF HEALTH CARE SYSTEMS

As discussed above these disorders vary in intensity and may respond to different intensities of intervention. Diverse health care systems have many roles to play in addressing our nation's substance misuse and substance use disorder problems, including:

- Screening for substance misuse and substance use disorders;
- Delivering prevention interventions to prevent substance misuse and related health consequences;
- Early intervention to prevent escalation of misuse to a substance use disorder;
- Engaging patients with substance use disorders into treatment;
- Treating substance use disorders of all levels of severity;
- Coordinating care across both health care systems and social services systems including criminal justice, housing and employment support, and child welfare;
- Linking patients to RSS; and
- Long-term monitoring and follow-up.

Prescription opioids are necessary and appropriate to treat moderate-to-severe pain and are often prescribed when there is a medical need for pain relief, including after surgery or injury, or for pain management with other health conditions such as cancer. Yet, prescriber behavior has changed noticeably in the last 40 years to include prescribing opioids for the treatment of chronic pain, despite the lack of evidence regarding the long-term effectiveness of opioids for chronic pain relief.

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