**Press Release** 

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## SAFE Glen Cove Coalition: NIDA-Gap in Access to Treatment for Adolescents with Opioid Use Disorder

Substance use disorders are chronic, treatable conditions from which people can recover. In 2021, over 46 million people in the United States had at least one substance use disorder. Substance use disorders are defined in part by continued use of substances despite negative consequences. They are also relapsing conditions, in which periods of abstinence (not using substances) can be followed by a return to use.

There has been a dramatic rise in overdose deaths among young people aged 14-18 in recent years, driven by illicit counterfeit pills containing fentanyl. For those with opioid use disorder, medications are the most effective treatment options for preventing both return to opioid use and overdose deaths. Buprenorphine is the only medication for opioid use disorder that is approved by the U.S. Food and Drug Administration for use in people aged 16-18. Although buprenorphine is not approved for use among people under the age of 16 in the U.S., some professional medical societies recommend that buprenorphine be considered as a treatment option for opioid use disorder in younger people.

Buprenorphine is FDA-approved for acute pain, chronic pain, and opioid dependence. It is an agent used in agonist substitution treatment, which is a process for treating addiction by using a substance (such as buprenorphine or methadone) to substitute for a stronger full agonist opioid (such as heroin).

According to researchers at the National Institute on Drug Abuse (NIDA), a new study indicates that only 1 in 4 residential addiction treatment facilities caring for U.S. adolescents under 18 years old. Only 1 in 8 offer buprenorphine for ongoing treatment. These findings highlight a significant gap in access to evidence-based addiction treatment among young people. The study was supported by the National Institute on Drug Abuse (NIDA) and the National Center for Advancing Translational Sciences (NCATS), both part of the National Institutes of Health, and led by researchers at Oregon Health & Science University (OHSU).

Residential treatment facilities are part of the continuum of care for adolescents with opioid use disorder. However, little is known about specific evidence-based treatment options offered to young people at these facilities, including medications for opioid use disorder. To address this gap, researchers at OHSU sought to determine how many adolescent treatment centers in the U.S. were offering buprenorphine to treat opioid use disorder.

Using the FindTreatment.gov database, which is maintained by the Substance Abuse and Mental Health Services Administration (SAMHSA), the researchers identified a list of 354 centers across the U.S. that

offered treatment for "substance use," in a "residential/24-hour residential" service setting, and for "children/adolescents" (defined as people aged 17 and younger) to include in the analysis.

Researchers called these facilities to inquire about treatment and services offered as potential users of these services for a 16-year-old with a recent non-fatal fentanyl overdose. Between October and December 2022, the study team called the facilities in random order and confirmed that 160 (45%) of these facilities provided residential treatment to patients under the age of 18.

Of the 160 residential addiction treatment facilities found to provide treatment to young patients, the researchers found that 39 facilities (24%) said that they offered buprenorphine to patients aged 16 or older, including through partnership with outside prescribing clinicians, though specific parameters for offering buprenorphine varied by site. For instance, only 20 facilities (12.5%) said that they offered buprenorphine for ongoing treatment. 12 facilities (7.5%) said that they offered buprenorphine to adolescents under 16 years of age.

Among the other 121 facilities that did not offer buprenorphine to adolescents or weren't sure, 57 (47%) indicated that adolescents prescribed buprenorphine by their own clinician could stay on it at least temporarily, although some stated they would discontinue it before discharge. And 27 (22%) required that adolescents were not taking buprenorphine to be admitted for residential treatment.

Based on these findings, the average person would need to call nine facilities on the SAMHSA list to find one that offered buprenorphine. To find one for an adolescent under 16, they would need to call 29 facilities.

These residential treatment centers see some of the most vulnerable adolescents and the research demonstrates the need to support these centers to make the evidence-based care of buprenorphine the norm.

The National Institute on Drug Abuse (NIDA) is a component of the National Institutes of Health, U.S. Department of Health and Human Services. NIDA supports most of the world's research on the health aspects of drug use and addiction. The Institute carries out a large variety of programs to inform policy, improve practice, and advance addiction science. For more information about NIDA and its programs, visit www.nida.nih.gov.

The SAFE Glen Cove Coalition is conducting an opioid prevention awareness campaign entitled. "Keeping Glen Cove SAFE," to educate and update the community regarding opioid use and its consequences. To learn more about the SAFE Glen Cove Coalition please follow us on www.facebook.com/safeglencovecoalition or visit SAFE's website to learn more about the Opioid Epidemic at www.safeglencove.org.