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Disclosures

- Dr. Wasser has no disclosures to report.
Most individuals with OUD will not receive treatment while incarcerated.

Forced withdrawal likely contributes to post-release overdose due to increased opioid craving and reduced tolerance.
- Death rates surge 200% - 700% in weeks after release primarily a result of opioid overdose.
- Forced withdrawal reduces the likelihood that individual will reenter treatment upon release.

1 in 20 on community supervision referred to treatment receive first-line therapy.

MAT Barriers and Challenges

- Per Federal Bureau of Justice, of nation’s 5,100 jails and prisons, < 30 have methadone or buprenorphine programs\(^1\)
- In a national survey of medical directors from 50 state and Federal Department of Corrections’ facilities, found a general preference for abstinence-based policies vs. MAT\(^2\)
  - Misconceptions about addiction
  - Incorrect association of forced withdrawal with curing opiate dependence
  - Ignoring risk to relapse
  - Lack of education
- Difficulty connecting individual to treatment upon release

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Impact of Continuing MMT During Incarceration Compared to Forced Withdrawal

- MMT continuation group (n = 184) compared to forced withdrawal control group (n = 198)
- Inmates in the MMT continuation group were less likely to receive disciplinary tickets (OR = 0.32)
- By 30 days post-release, 40.6% of the MMT continuation vs. 10.1% of the control group had re-engaged in the community (OR = 6.08)
- Inmates who engaged in MMT with the same provider before, during, and after incarceration were less likely to recidivate
  - Recidivism outcomes include re-arrest, reincarceration, receipt of new charges (drug, violent, felony, misdemeanor) within 6 mon of release

MMT = Methadone maintenance treatment
Novel Approaches: Rhode Island Department of Corrections (RIDOC)

- New model of screening and protocol for MAT treatment (methadone, buprenorphine or naltrexone) launched in 2017
- Individuals arriving at RIDOC receiving MAT were maintained without tapering or discontinuation
- System of 12 community-located Centers of Excellence in MAT established to promote transitions and referrals upon release

### Novel Approaches: Rhode Island Department of Corrections (RIDOC)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>First 6 Mons of 2016</th>
<th>First 6 Mons of 2017</th>
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<tbody>
<tr>
<td>Admission for incarceration, No.</td>
<td>4822</td>
<td>4512</td>
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<tr>
<td>Release from incarceration, No.</td>
<td>4005</td>
<td>3426</td>
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<tr>
<td>No. of inmates receiving MAT monthly, mean (SD)</td>
<td>80 (18)</td>
<td>303 (39)</td>
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<tr>
<td>No. of inmates receiving a specific MAT monthly, mean (SD)</td>
<td></td>
<td></td>
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<tr>
<td>Buprenorphine</td>
<td>4 (3)</td>
<td>119 (15)</td>
</tr>
<tr>
<td>Methadone</td>
<td>74 (16)</td>
<td>180 (25)</td>
</tr>
<tr>
<td>Naltrexone</td>
<td>2 (1)</td>
<td>4 (1)</td>
</tr>
<tr>
<td>Naloxone kits dispensed at release from incarceration, No.</td>
<td>72</td>
<td>35</td>
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Results: 60.5% Reduction in Mortality

- 60.5% reduction in mortality ($p = 0.01$)
- Identification of OUD in criminal justice setting with linkage to medication and supportive services after release is a promising strategy to reduce overdose and OUD

<table>
<thead>
<tr>
<th>Decedents with Recent Incarceration</th>
<th>First 6 months 2016</th>
<th>First 6 months 2017</th>
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<tr>
<td></td>
<td>26/179 (14.5%)</td>
<td>9/157 (5.7%)</td>
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