

Opioid addiction: Michigan counties struggle to meet the need for treatment

May 10 2019, by Kristin Kerecman

More people now die of drug overdoses than car crashes in the state of Michigan, ranking the state among the top third in the country for drug-related deaths.

While medication-based treatments for [substance abuse disorders](#) are effective, there are substantial barriers to accessing care across the state.

According to a University of Michigan analysis, almost one-third of Michigan counties have no medication-based treatment services for [opioid addiction](#).

"Michigan's shortfall of adequate treatment programs not only impacts individuals and families experiencing addiction, it also affects [public health](#) as well as social and economic welfare of entire regions in our state," said Amy Bohnert, associate professor at U-M's Department of Psychiatry. "This forces our cities, counties and state to carry a huge economic burden, including the costs of health care, lost productivity, [addiction treatment](#) and criminal justice response."

U-M's analysis, which uses data from the Michigan Department of Health and Human Services and the Michigan Public Policy Survey, an ongoing survey of Michigan's local government officials, examines drug treatment needs across Michigan counties and makes [policy recommendations](#) for increasing access to evidence-based care. It was compiled by the university's Poverty Solutions initiative.

Key findings include:

- In 2016, Michigan had the 8th-largest number of deaths due to drug overdose and the 14th-highest overdose death rate in the country.
- Only 18% of Michigan counties had access to all recommended treatment options and one-third of counties had no medication-based treatment services for opioid addiction.
- Of the top 20 counties with the highest drug overdose rate in Michigan, six had no medication-based treatment services for opioid addiction.
- Officials in nearly 75% of Michigan counties reported an unmet need for drug treatment programs in their jurisdiction.

The findings echo a recent national report by the National Academies of Sciences, Engineering and Medicine that shows medications for opioid use disorder save lives, yet most people with this disorder receive no treatment at all.

Huda Akil, co-director of U-M's Molecular & Behavioral Neuroscience Institute and one of the national study's committee members, says the lack of access to medication-based substance use treatment is one critical issue impacting the nation, and especially Michigan.

"Addiction is a deadly brain disorder, and withholding medications that can treat it is unethical," Akil said. "We only have three types of medications at this stage, and our committee felt strongly that they should all be available in all settings to save lives. This most certainly includes Michigan and other areas of the Midwest that have seen a dramatic rise in this problem.

"Research is critical for bringing additional [treatment options](#) for opioid addiction, and better, non-addictive pain medications that will help stem

this devastating crisis."

To increase understanding about the policy implications of addiction treatment in Michigan, the U-M analysis includes recommendations to address the lack of access to medication-based treatments, especially in Michigan's less populous rural and northern counties.

Policy implications include:

- Incorporating information on addiction, substance use disorders and medication-based treatment into Michigan's Automated Prescription System.
- Assessing the impact of removing Michigan's prior authorization requirement for buprenorphine.
- Implementing a "hub and spoke" model for addiction treatment across the state.

"Access to treatment is very much an economic and poverty-related issue," said Jennifer Erb-Downward, senior researcher at U-M's Poverty Solutions. "While opioid [addiction](#) is a crisis affecting people across the economic spectrum, people living in poverty are the least likely to be able to access proper [treatment](#), which is a major barrier to achieving any economic mobility."

Provided by University of Michigan

Citation: Opioid addiction: Michigan counties struggle to meet the need for treatment (2019, May 10) retrieved 6 May 2024 from <https://medicalxpress.com/news/2019-05-opioid-addiction-michigan-counties-struggle.html>

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