



PRESCRIPTION DRUGS

A REVIEW OF EVIDENCE-BASED PROGRAMS

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PROGROUP
APPLIED SYSTEMS

Prescription Drugs

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NREPP Evidence-Based Programs

<http://www.nrepp.samhsa.gov/AdvancedSearch.aspx>

Celebrating Families:

Parenting skills training program for parents in substance abuse recovery, and in which children are at risk for domestic violence. (Indicated/Selective)

Communities that Care: Community-level intervention in which stakeholders learn how to select & implement evidence-based prevention programs. (Universal)

Guiding Good Choices: Education & informational program for parents of children in grades 4-8, with information to guide parents about risk factors for drug use. (Universal)

Healthy Workplace: Set of substance abuse prevention programs that teach workers to make choices about substance use. (Universal)

Lead & Seed: Education & informational program for young people in grades 6-12 aimed at increasing knowledge about ATOD, guiding them in developing plans to reduce use and helping implement plans. (Universal)

Refuse, Remove, Reasons: Substance abuse prevention program designed to reduce young people's favorable attitudes about ATOD; decrease perception of normative use; and increase refusal skills. (Universal)

Stay on Track: School-based substance abuse prevention curriculum taught over three years for middle school students in grades 6-8. Designed to enhance students' decision-making, goal setting, communication, and resistance strategies, "improve antidrug normative beliefs," and reduce substance use. (Universal)

Storytelling for Empowerment: School-based, bilingual (English & Spanish) intervention for teenagers at risk for substance use, HIV & others due to living in high-risk, impoverished area with high drug use & little access to health care. (Selective)

Georgia Programs

Systems/Environmental

Georgia Prescription Drug Monitoring Program (PDMP):

<http://medicalboard.georgia.gov/sites/medicalboard.georgia.gov/files/imported/GCMB/Files/GCMB-PDMP0713v2.pdf>

Georgia Prescription Drug Abuse Prevention Initiative:

[http://www.stoprxabuseinga.org/fileadmin/temp/6-20-](http://www.stoprxabuseinga.org/fileadmin/temp/6-20-12_Hypertext_Document_for_StopRxAbuseGA_org_website_4_Priority_Areas_JB.pdf)

[12_Hypertext_Document_for_StopRxAbuseGA_org_website_4_Priority_Areas_JB.pdf](http://www.stoprxabuseinga.org/fileadmin/temp/6-20-12_Hypertext_Document_for_StopRxAbuseGA_org_website_4_Priority_Areas_JB.pdf)

Four Priority Areas:

1. Education
2. Monitoring (Georgia PDMP)
3. Proper Medication Disposal
4. Enforcement

CDC Evidence-Based Programs

The CDC, on the other hand, has a three-pronged approach to reducing misuse of prescription drugs:

1. Safe Prescribing Practices
2. State Policies
3. PDMP

Safe Prescribing Practices

The CDC's Injury Center works with doctors to create guidelines for safe use of opioids and other prescription drugs.

State Policies

According to the CDC, the US is currently experiencing an "epidemic of prescription drug deaths." As the primary legal responsibility to oversee prescription drug practices lies on the states themselves, the CDC provides "menus of legal strategies" that states have used to respond to prescription drug misuse. For example, the CDC has created a menu that gives physicians, pharmacists, public health workers, and patients more information about the benefits of using Tamper Resistant Prescription Forms. These menus provide states with information in the form of best practices to guide public policy.

PDMP

According to the CDC, PDMPs are the "most promising" state level intervention to reduce prescription drug misuse and protect patients. Researchers have begun to evaluate states' PDMPs and have issued recommendations to the states (Lee, 2014). Some of these recommendations include creating an advisory committee to maintain and operate the PDMP, to support the professional obligation of physicians to consult the PDMP prior to administering controlled substances, and to support interstate sharing of information.

- a. A study that explored the effectiveness of North Carolina's PDMP found a number of positive findings:
 - i. Use by doctors is up
 - ii. The PDMP (called CSRS in North Carolina) didn't reduce legitimate prescriptions
 - iii. The CSRS helped to identify patients who are at high risk for overdose death
 - iv. Use of CSRS has been linked with receiving treatment for opioid dependence

http://pdmpefficiency.org/sites/all/pdfs/NC_control_sub_eval_pt_2.pdf

http://www.nhcenterforexcellence.org/pdfs/Strategies_NMUPD.pdf