

Wisconsin Department of Corrections Vivitrol Pilot for Opioid Addiction

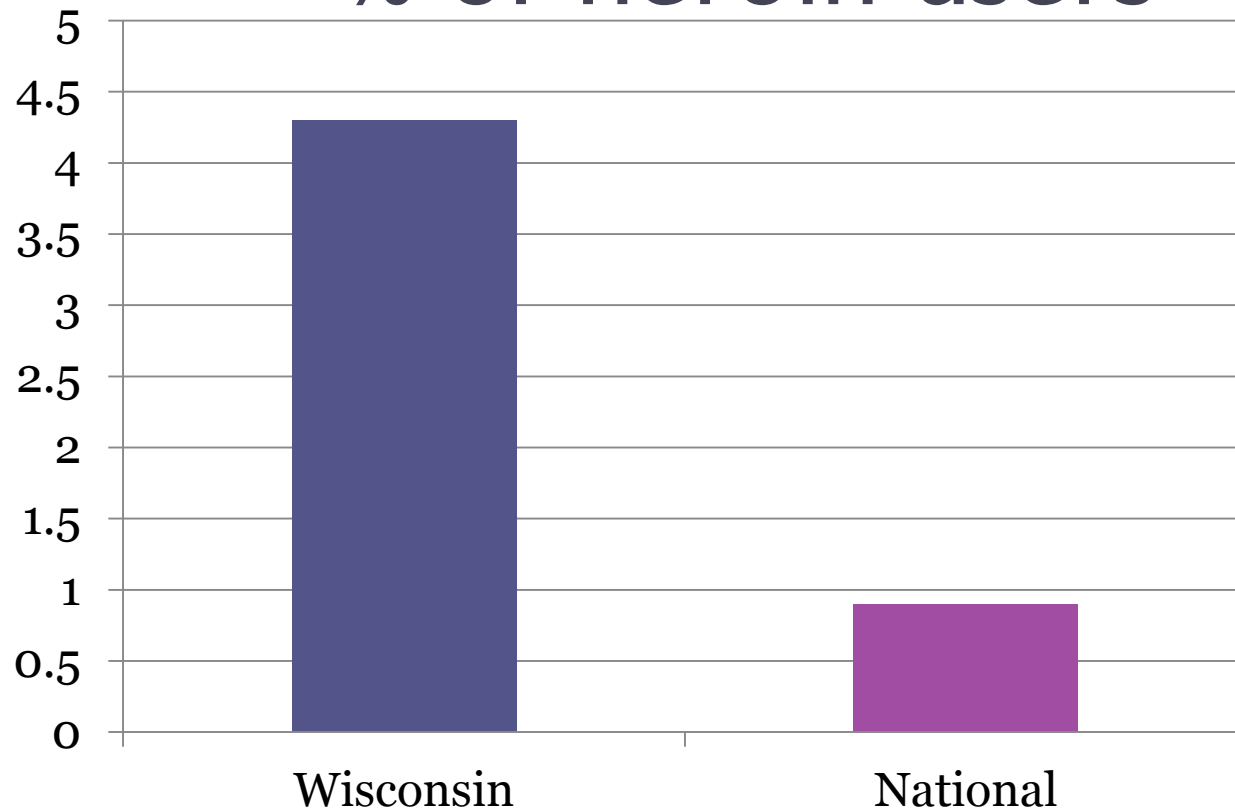
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Background

Wisconsin State Council on Alcohol and other Drug Abuse (SCAODA)
Prevention Committee's Heroin

Wisconsin's Heroin Epidemic: Strategies and Solutions, July 2014

% of heroin users



Wisconsin State Council on Alcohol and other Drug Abuse (SCAODA) Prevention Committee's Heroin Ad-hoc Committee released *Wisconsin's Heroin Epidemic: Strategies and Solutions*, July 2014

SCOADA Recommendations

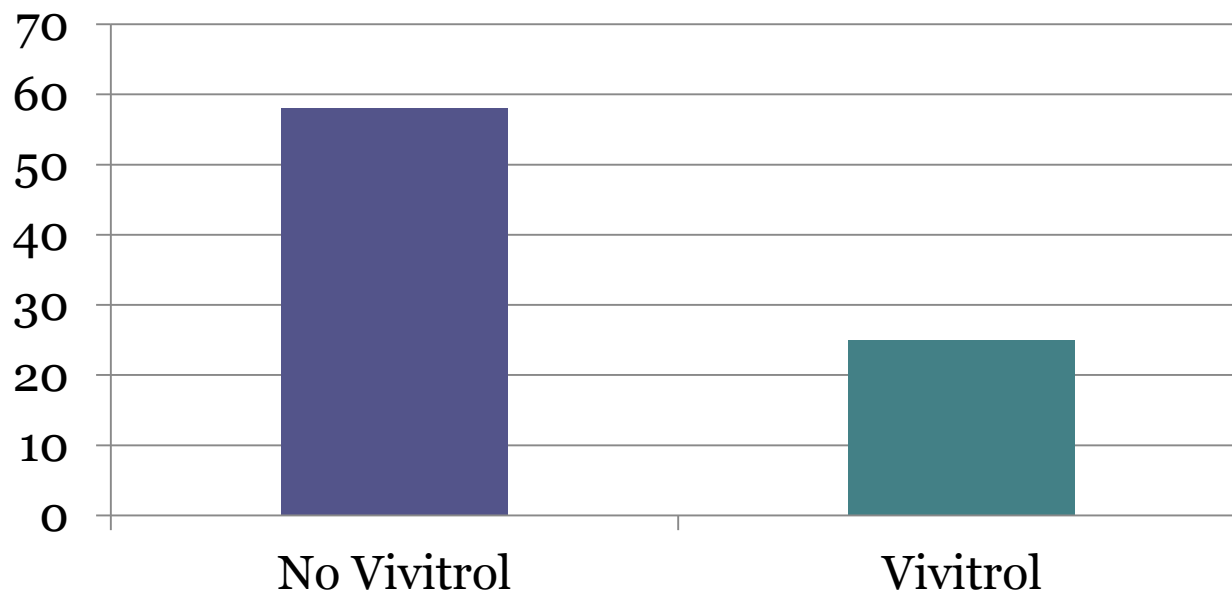
“Engage the Department of Corrections to ensure a system for providing interventions to incarcerated persons who have a substance use disorder (specifically heroin).”

“Pilot programs for the administration of Vivitrol to persons as they leave incarceration should be established.”

Support for a Vivitrol Program



One year recidivism rate standard parole supervision with or without Vivitrol



Cornish JW, O'Brien C. Naltrexone for probationers and parolees.
Journal of Substance Abuse Treatment. 2006 31(2):107-111.

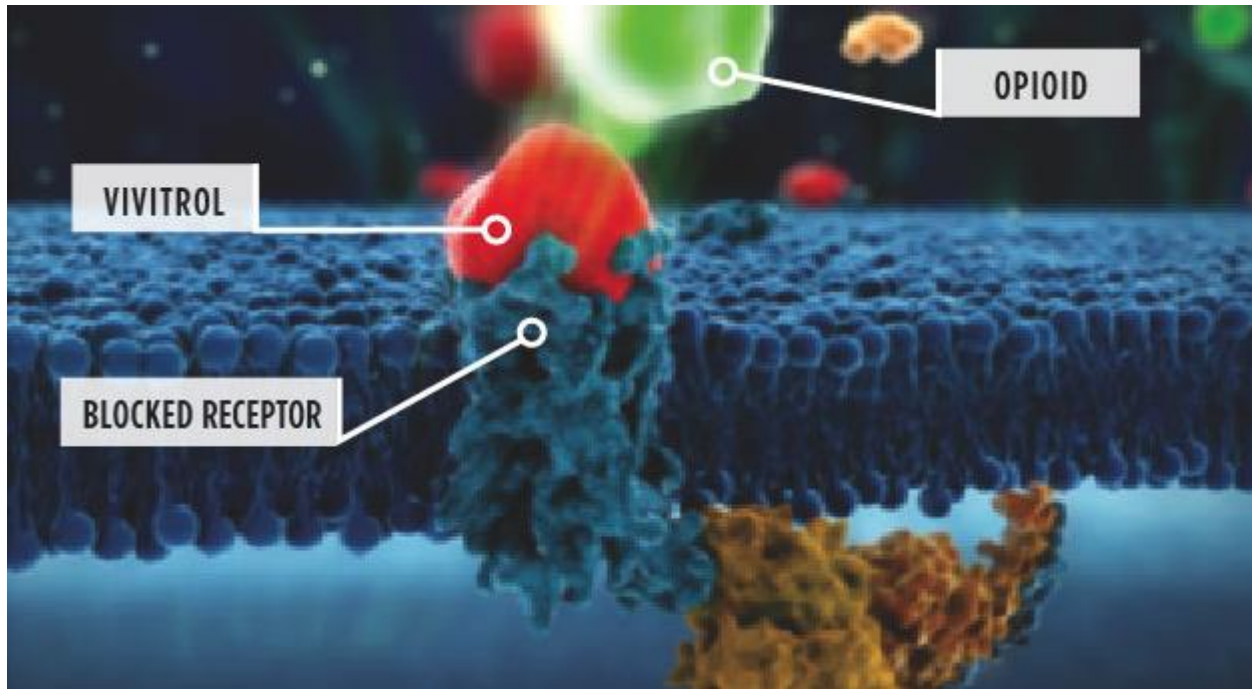
Wisconsin's Approach

Governor Walker's 2015-17 Executive Budget Proposal included annual General Purpose Revenue (GPR) funding in the amount of \$836,700 (\$1,673,400 over the biennium) for an opioid addiction treatment pilot program within the Department of Corrections (DOC).

2015 Act 55 (2015-17 Biennial Budget) states: *“Before January 1, 2016, the department of corrections shall submit to the joint committee on finance a request for the release of funds from the appropriation under section 20.865 (4) (a) of the statutes and a detailed plan for implementing a pilot program for treating offenders who have been assessed with an opiate addiction.”*

Vivitrol

- Extended release naltrexone
- Once monthly intra-muscular injection
- Prevent relapse to opioid dependence after detoxification
- Approved for opioid dependence treatment in October of 2010



Benefits

- Administered once monthly by medical staff
- Decreases issues with patient compliance
- Long acting nature gives steady blood level and drug effectiveness
- Not divertible
- Outside of injection site reactions, minimal to no side effects

Risks

- The amount of heroin or other opioid needed to overcome the blockade of Vivitrol is such that the risk of overdose is very high
- May cause liver damage in some patients
- Very rarely cause an allergic pneumonia
- Patients taking opioids within 7 days of the injection who receive the injection can be put into abrupt withdrawal

Limitations to Expanded Use

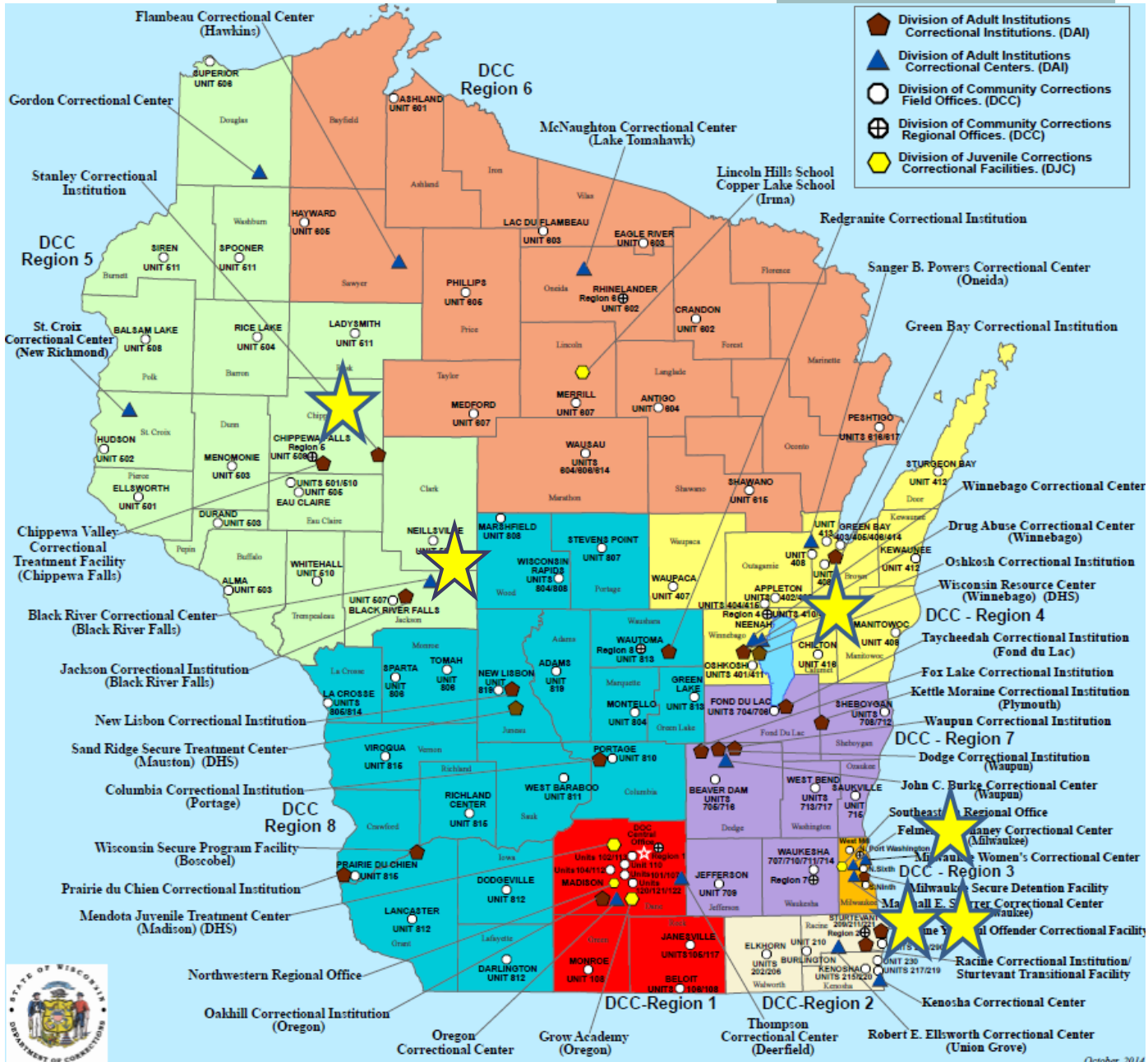
- Expensive: Average cost \$1100, variable insurance coverage
- Seven days opioid free before the first injection-difficult for patients to comply with
- Limited addiction medicine providers, even fewer providing Vivitrol
- Extended release makes acute pain management more difficult

The DOC project

- Pilot the project at facilities with early release/AODA programs to offenders with upcoming release dates
- Pilot the program to offenders on community supervision in the Department of Community Corrections.

Participation Guidelines

- Voluntary
- Addiction is present
- Medically cleared for the drug
- Offender must continue AODA treatments
- In DCC region 4 or releasing to region 4



Why Region 4?

- Significant rise in heroin use compared to other regions statewide
- According to the Wisconsin State Crime Laboratories⁷, heroin cases analyzed in this region of the state increased 111% from 2012 (93 cases) to 2014 (196 cases).
- Concentrated volume of Addiction specialists and AODA services in this area
- Focus the pilot's attention on one area before addressing the entire state

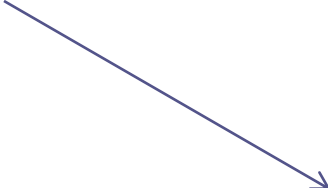
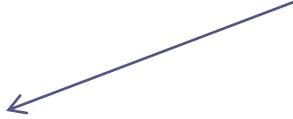
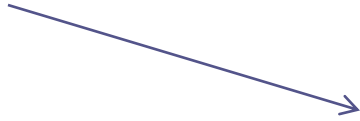
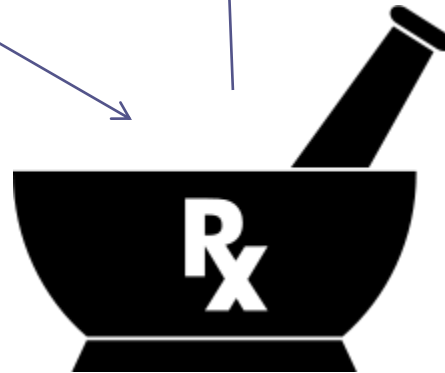
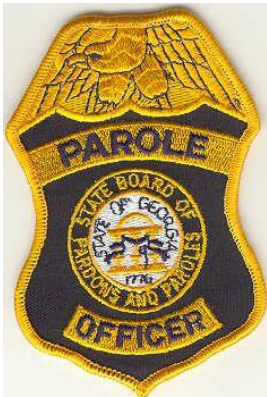
Challenges

Despite focusing on only 5 institutions and one DCC region there are still a large number of staff to coordinate.

Counseling Clinic



Counseling Clinic



Goals

- *Short-term goals: Pilot participants receive AODA treatment and medication assisted treatment to abstain from opiate use.*
- *Medium-term goals: Reduce number of AODA-related probation violations. Decrease incidence of opioid-abuse relapse.*
- *Long-term goals: Reduce recidivism rates of program participants. Decrease rates of overdose among program participants.*

Goal

Offer positive contributions to the public health crisis identified by the SCAODA report in 2014.