

SUPRA BULLETIN

The Substance Use Priority Research Area (SUPRA) Quarterly Newsletter



SUPRA GRANT AWARDEES

by Brooke Poe

The Substance Use Priority Research Area (SUPRA) recognizes the necessity to explore additional opportunities to support substance use research at UK. To offer a platform for faculty and students, SUPRA created the Pilot Grant RFA and the Super Research Grant. These grants encourage innovative, collaborative substance use research from a basic science, clinical, or community research perspective to provide funds for the collection of preliminary data to support new extramural grant applications. Additionally, the student grant affords undergraduate students the opportunity for a high-impact learning environment and provide valuable opportunities to be paired and mentored by graduate students on a research project. The Pilot Grant Review committee selected three (3) faculty members and five (5) students pairs to receive the grants. With great pleasure, we announce the following awardees:

Faculty

Students

**CHRISTAL BADOUR, PHD
PSYCHOLOGY**

A Patient-Centered Approach to Treating PTSD and Substance Abuse in Patients Receiving Medication Assisted Treatment (MAT)

**ROBYN BROWN, PHD
SOCIOLOGY**

Provider Bias toward Patients with Opioid Use Disorders: Understanding Stigma as a Barrier to MOUD Implementation

**JESSICA WEAVER, PHD
PSYCHOLOGY**

Testing an online insomnia intervention to reduce alcohol use via improved sleep among at-risk heavy drinkers

Svetlana Dzhala (U)

& Shannon Eaton (G)

Emily Punzal (U)

& Samantha Malone (G)

Rhea B. Sitaram (U)

& John Brown (G)

Abby Wilcox (U)

& Caleb Bailey (G)

Summer Williams (U)

& Caitlyn Hood (G)

(U) - Undergraduate Student
(G) - Graduate Student

IN THIS ISSUE

**COVID-19 AFFECTS
POLICY FOR OPIOID
TREATMENT**

WELCOME NEW FACULTY

**SUBSTANCE USE
RESEARCH EVENT 2021**

**SUPRA'S STATEMENT ON
RACISM**

**UPCOMING
CONFERENCES**

DATES AND DEADLINES

*SUPRA is supported by funds
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for Research*

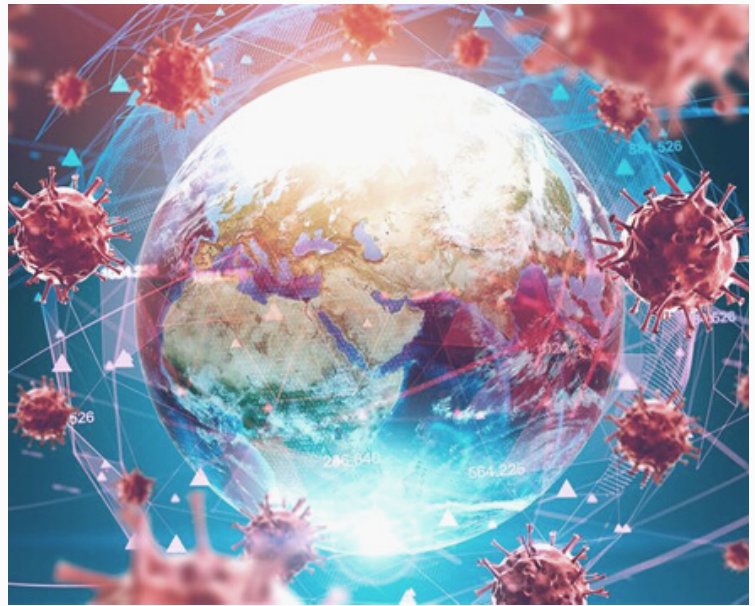
POLICY CHANGES AFFECTING MEDICATION TREATMENT FOR OPIOID USE DISORDER DURING THE COVID-19 PANDEMIC

by Michelle Lofwall MD, Laura Fanucchi MD and Sharon Walsh PhD

The ongoing need for increasing access to life-saving medications for opioid use disorder (MOUD) has become even more urgent in the context of the COVID-19 pandemic. While medication treatment with methadone and buprenorphine decrease all-cause mortality by more than 50%, few people with OUD receive MOUD (1,2). Opioid-involved overdose deaths were climbing before the pandemic and reports suggest overdose events and overdose deaths are further increasing with the pandemic (3, 4). Mitigation strategies for COVID-19 have led to disruption in the delivery of healthcare, increased social isolation, and rapid release of individuals from jails and prisons- all of which may increase the risk of overdose. The opioid epidemic and the COVID-19 pandemic together have highlighted how strict regulations in place for accessing methadone and buprenorphine treatment were not aligned with protecting and promoting public health, and now have undergone some substantial changes.

"Research is critically needed to evaluate the impact of these changing clinical care paradigms and rapidly expanded telemedicine on access to and retention on MOUD"

The Drug Enforcement Agency (DEA), the Substance Abuse and Mental Health Services Administration, and the US Department of Health and Human Services, have adjusted both statutory and enforcement requirements to make initiation and retention in methadone and buprenorphine treatment more feasible during the pandemic (5). With regard to buprenorphine, the Ryan Haight Act requires an in-person examination before starting buprenorphine, and this now has been waived allowing for use of telemedicine visits, decreasing the risk of COVID spread. The DEA now allows initiation of buprenorphine through audio only telemedicine visits and does not require video. This change will improve access to care for those without access to reliable broadband, especially in more rural and underserved communities. Patients' homes rather than requiring in-person visits.



With regard to methadone, initiation of treatment still requires an in-person examination but previously stringent rules on the number of take-home methadone doses an individual may receive has become more flexible (up to 28 days), and medication can be delivered by authorized personnel to patients' homes rather than requiring in-person visits.

Anecdotally, providers have welcomed the added flexibility of these regulations, appreciating the ability to utilize telemedicine in order to initiate and help retain patients in care. Research is critically needed to evaluate the impact of these changing clinical care paradigms and rapidly expanded telemedicine on access to and retention on MOUD (6). These policy changes are set to expire when the COVID pandemic ends; thus, research results should inform whether these policy changes should be sustained and may help address the ongoing opioid epidemic, which will likely continue beyond the pandemic.

1. Sordo L, Barrio G, Bravo MJ, et al. Mortality risk during and after opioid substitution treatment: systematic review and meta-analysis of cohort studies. *BMJ*. 2017;357:j1550. Published 2017 Apr 26. doi:10.1136/bmj.j1550
2. Laroche MR, Stopka TJ, Xuan Z, Liebschutz JM, Walley AY. Medication for Opioid Use Disorder After Nonfatal Opioid Overdose and Mortality. *Ann Intern Med*. 2019;170(6):430-431. doi:10.7326/L18-0685
3. KY Injury Prevention Center July 2020 Newsletter. Kentucky Drug Overdose Spike during COVID-19 Shutdown
<http://www.mc.uky.edu/kiprc/pubs/files/July%202020%20KyOD2A%20final.pdf>
4. Slavova S, Rock P, Bush HM, Quesinberry D, Walsh SL. Signal of increased opioid overdose during COVID-19 from emergency medical services data [published online ahead of print, 2020 Jul 10]. *Drug Alcohol Depend*. 2020;214:108176. doi:10.1016/j.drugalcdep.2020.108176
5. <https://www.samhsa.gov/coronavirus>
6. Walsh SL, El-Bassel N, Jackson RD, et al. The HEALING (Helping to End Addiction Long-term) Communities Study: Protocol for a Cluster Randomized Trial at the Community Level to Reduce Opioid Overdose Deaths through Implementation of an Integrated Set of Evidence-based Practices. *Drug Alcohol Depend*. Under review.

Welcome New Faculty

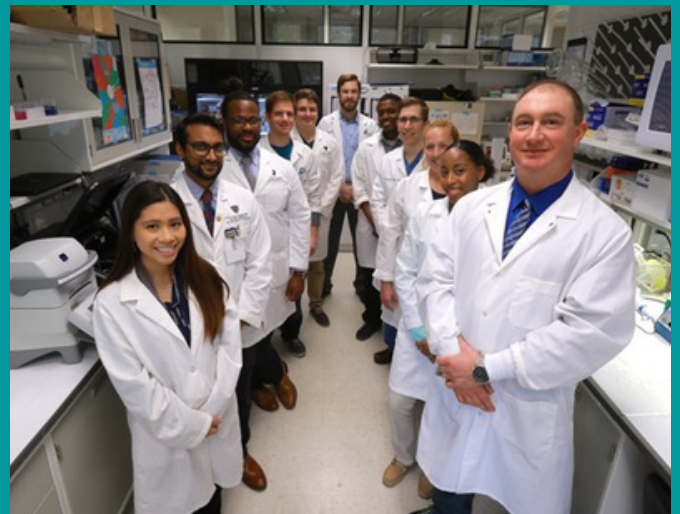


Dr. Cassandra Gipson-Reichardt

Associate Professor

Department of Family and Community Medicine,
College of Medicine

My lab focuses on dysregulated glutamatergic plasticity following self-administration of drugs of abuse including nicotine, cocaine, and opioids, with a focus on translation. We study neuroimmune-glutamate interactions, astrocytic dysregulation, hormonal contributions, and cholinergic interneuronal control of glutamate signaling within the reward pathway following drug self-administration in preclinical models.



Dr. Terry D. Hinds

Associate Professor

Department of Pharmacology and Nutritional
Sciences, College of Medicine

The Hinds lab investigates nuclear receptors, which are ligand-activated transcription factors that serve as a large family of drug targets. We have been studying how nutrients from the diet and stress hormones (glucocorticoids, e.g., cortisol) regulate metabolic dysfunction in obesity and diabetes. Recent discoveries have shown that drug-targeting of nuclear receptor pathways are beneficial in insulin-resistant diabetes and addiction. The lab's focus is to understand the molecular mechanisms in the liver that regulate fat accumulation, and how this causes disturbances in the liver-to-brain axis from diet-induced obesity and drugs of abuse. Our studies may reveal new fronts for understanding how metabolic dysfunction affects our body's peripheral responses that communicate with the brain.



Dr. Carolyn Lauckner
Assistant Professor
Department of Behavioral Science,
College of Medicine and
Center for Health Equity
Transformation

Dr. Carolyn Lauckner uses technology-based approaches to reduce substance use among vulnerable populations. Her current work is testing an mHealth-based motivational interviewing intervention that seeks to reduce alcohol consumption among veterans living with HIV/AIDS.

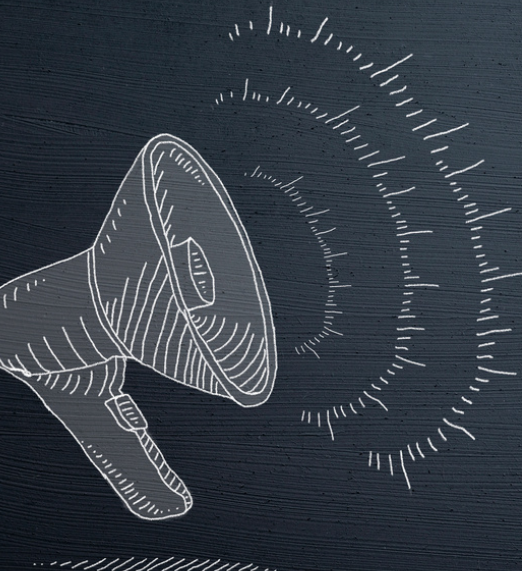


Dr. Rachel Vickers-Smith
Assistant Professor
Department of Epidemiology, College
of Public Health and
Center on Drug and Alcohol Research

Dr. Vickers-Smith is an epidemiologist whose research focuses on: (i) novel methods for detecting emerging drugs of abuse, (ii) developing substance use phenotypes for genetic studies, and (iii) racial disparities in receipt of substance use disorder diagnoses.

SUPRA'S STATEMENT ON RACISM

The Substance Use Priority Research Area (SUPRA) has zero tolerance for racial discrimination at the individual, institutional, and structural levels. We embrace a culture of inclusion. SUPRA is committed to training scholars from unrepresented backgrounds, examining ways to diversify our research teams, and ensuring inclusion and diversity among those who participate in substance use research. We actively promote substance use research that improves the health and well-being of Black, Indigenous, and People of Color communities.



SUBSTANCE USE RESEARCH EVENT 2021

by Hillary Surratt

Planning is underway for the annual **UK Substance Use Research Event (SURE)**, to be held on March 3rd, 2021, at the Gatton Student Center in Lexington. Organizing Committee members (Bill Stoops, Pavel Ortinski, Chris Delcher, Christal Badour, Hilary Surratt) are working closely with Brooke Poe, who provides critical administrative support to facilitate planning the event. Now approaching its third annual meeting (and formerly known as Substance Use Research Day), the Organizing Committee and SUPRA leadership are considering new naming and branding opportunities to expand and broaden recognition and visibility of the event. As planning momentum grows, the Organizing Committee is also exploring options for hybrid meeting formats should the COVID-19 pandemic continue to impact professional meetings and gatherings.

SURE 2021 will include keynote plenary presentations from stellar researchers in the SUD space: **Dr. Yasmin Hurd** on the pre-clinical research domain and **Dr. Magdalena Cerdá** on the public health and policy side. Dr. Hurd is the Ward-Coleman Chair of Translational Neuroscience and the Director of the Addiction Institute at the Icahn School of Medicine at Mount Sinai in New York City. Dr. Cerdá is an Associate Professor and Director of the Center for Opioid Epidemiology and Policy at the Department of Population Health at NYU Grossman School of Medicine. Thematic symposia are planned that address timely and important health issues, the intersection COVID-19 and SUD, health disparities in substance use disorder, and policy issues that impact access to care and provision of optimal care.



UPCOMING CONFERENCES

INTERNATIONAL RECOVERY DAY SEPT. 20

IMPROVING OUTCOMES IN THE TREATMENT OF OPIOID DEPENDENCE (IOTOD) VIRTUAL CONFERENCE SEPT. 24

Platform: Online

2ND GLOBAL CONFERENCE ON ADDICTION MEDICINE, BEHAVIORAL HEALTH AND PSYCHIATRY (GAB 2020) OCT. 04

Platform: In person, Location: Orlando

ADDICTION HEALTH SERVICES RESEARCH VIRTUAL CONFERENCE 2020 OCT. 14

Platform: Online

THE INTERNATIONAL NURSES SOCIETY ON ADDICTIONS (INTNSA) OCT. 22

Platform: Online

SOCIETY FOR THE STUDY OF ADDICTION (SSA) CONFERENCE AND PHD SYMPOSIUM NOV. 05

Platform: Online

WORKING WITH THE WHOLE PERSON: ALCOHOL, MENTAL HEALTH AND COMPLEX NEEDS DEC. 02

Platform: Online

UK DATES & DEADLINES

IGNITING RESEARCH COLLABORATIONS (IRC) SEPT. 30

MIDTERM WEEK OCT. 12

ELECTION DAY - HOLIDAY NOV. 03

THANKSGIVING - HOLIDAY NOV. 26

FINALS WEEK DEC. 01

OVPR CONFERENCE & WORKSHOP GRANTS DUE DEC. 01


UPCOMING CONFERENCE SUBMISSION DATES

83RD CPDD ANNUAL MEETING SEPT. 01

SSA CONFERENCE 2020 SEPT. 14

RSA CONFERENCE 2020 SEPT. 18

SURE 2021 OCT. 15



Be sure to look for the SUPRA website coming fall 2020!

For further information regarding the conferences, UK events, and/or calls for submissions please click on the titles to be taken to the corresponding informational website.