The Opioid Crisis

Mindfulness-Based Interventions for the Treatment of Opioid Use Disorders: Research and Clinical Considerations

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OVERVIEW

- Substance Use Disorders
- The Opioid Crisis
- Mindfulness-Based Relapse Prevention
- Research in Development
Substance Use Disorder (DSM-5):

A. Continued use despite health problems
B. Interference with important activities
C. Increased drug-seeking behavior
D. Trying to quit without success
E. Using more than intended
F. Withdrawal when trying to quit
G. Build up of tolerance
H. Craving for substance
I. Using despite social or personal problems
J. Using in hazardous situations
K. Missing work or school because of use

Addiction Severity:
2-3: “Mild”
4-5: “Moderate”
6+: “Severe”

DSM-5, APA, 2014;
Annual Cost of Substance Abuse?

Abuse of tobacco, alcohol, and illicit drugs is costly to our Nation, exacting more than $740 billion annually in costs related to crime, lost work productivity and health.
Opioid Overdoses within Past Year

- U.S. in 2016: **60,000+ drug overdoses**
- 21% higher than 2015
- Adults under 50: Leading cause of death

Opioid Drug Overdoses (OD)

- 2016: 4,642 drug-related overdoses in PA
- 37% increase from 2015
Opioid Use in Pennsylvania

Opioid Drug Overdoses (OD)

• 2016: 4,642 drug-related overdoses in PA
• 37% increase from 2015

• Chester County:
  – 2016: 97 overdoses
  – 2015-16: 53% increase in ODs

Addiction: Chronically Relapsing Disorder

“Chronic, relapsing condition”

- 65% to 90% lapse first year following treatment
  - 50% in first 2 months

Opioid Relapse

- 91% following residential detoxification
- 59% within 1 week of treatment termination.

- Improved coping skills can result in less severe use at first lapse and lighter use thereafter
Addiction: Chronically Relapsing Disorder

Brechta et al., 2014; Choi et al., 2002; Hunt et al., 1971; Maisto et al., 2003; Sutton, 1979; Witkiewitz & Masyn, 2008; Xie et al., 2005
Original Investigation

Relative Efficacy of Mindfulness-Based Relapse Prevention, Standard Relapse Prevention, and Treatment as Usual for Substance Use Disorders
A Randomized Clinical Trial

Sarah Rowen, PhD; Katie Witkiewitz, PhD; Seema I. Clifasefi, PhD; Joel Grow, PhD; Neharika Chawla, PhD; Sharon H. Hsu, MS; Halay A. Carroll, BS; Erin Harrop, BS; Susan E. Collins, PhD; M. Kathleen Lustyk, PhD; Mary E. Larimer, PhD
Mindfulness-Based Relapse Prevention (MBRP)

- Integrates evidenced-based practices (i.e., CBT) to decrease the probability and severity of relapse.

- Training in meditation to increase mindfulness of emotional and cognitive experiences.

Relapse Prevention

Goals of MBRP:

1. Awareness of *personal triggers* and *habitual reactions*; learn to create a *pause* in seemingly automatic processes.

2. *Change relationship to discomfort*, learn to *recognize challenging emotional and physical experiences*; *responding* in skillful ways.

3. Foster *nonjudgmental, compassionate approach toward self*.

4. Build *lifestyle supportive of mindfulness practice and recovery*.

http://www.mindfulrp.com
Improving Treatment for Opioid Addiction: A Pilot Mindfulness-Based Relapse Prevention (MBRP) Study

**Gaudenzia:** Large non-for-profit provider of SUD services in PA, DE, MD, DC; Serving 20,000 patients/year

**Gaudenzia West Chester House (GWCH):**
- Residential service (60 patients/month)
- Length of stay: 32-60 days
- Discharge and follow-up services
  - *Vivitrol (extended-release naltrexone)*
**Vivitrol**: Extended-Release Naltrexone; XR-NTX
- Monthly intramuscular injection
- Opioid Antagonist (blocks opioid receptors)
- Reduces craving and prevents relapse
- Efficacious in reducing relapse and overdoses

*Lee et al., 2017, The Lancet*
OUD Medication Assisted Treatment (MAT)

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*FDA advocates for adjunctive psychosocial interventions*
*XR-NTX addresses biological aspect of addiction.*

*Lee et al., 2017, The Lancet*
Research Focus

Improving Treatment for Opioid Addiction: A Pilot Mindfulness-Based Relapse Prevention (MBRP) Study

GWCH open enrollment
OUD: XR-NTX

Enrollment & Assessment
Improving Treatment for Opioid Addiction: A Pilot Mindfulness-Based Relapse Prevention (MBRP) Study

GWCH open enrollment OUD: XR-NTX

Treatment As Usual (TAU)

MBRP

Enrollment & Assessment → TAU and/or MBRP During at GWCH
Research Focus

Improving Treatment for Opioid Addiction: A Pilot Mindfulness-Based Relapse Prevention (MBRP) Study

GWCH open enrollment OUD: XR-NTX

Treatment As Usual (TAU)

MBRP

Drug-Use & Psychological Assessment

1 mo. 2 mo. 3 mo.

Enrollment & Assessment

TAU and/or MBRP During at GWCH

Post-GWCH Discharge Follow-Up Assessment
Improving Treatment for Opioid Addiction: A Pilot Mindfulness-Based Relapse Prevention (MBRP) Study

Hypotheses: MBRP patients (relative to TAU)

• Fewer positive UDS during follow-up
• Greater adherence to XR-NTX medication
• Greater emotion-focused coping
• Greater improvements in overall psychological health
Treatment-Research Program Aims

• Optimize treatments that combine pharmacological (i.e., XR-NTX) and behavioral (i.e., MBRP) approaches
• Reduce frequency and severity of opioid relapse
• Increase quality of life for those suffering with OUD
Thank You

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