

Iowa Department of Public Health  
Division of Behavioral Health/Bureau of Substance Abuse  
Opioid Update for Wednesday, January 23, 2019

The Iowa Department of Public Health (IDPH) offers the Opioid Update to share information about opioid use and Iowa's efforts to address the national opioid epidemic. Please feel free to submit topics to Julie Jones at [julie.jones@idph.iowa.gov](mailto:julie.jones@idph.iowa.gov).

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## **Department News**

### **POMW Project Announces Upcoming Training Series**

The Iowa Prevention of Opioid Misuse in Women (POMW) Project will be hosting a regional training series, focusing on opioid use in Iowa and strategies that support the decrease of opioid misuse in women. Specific training objectives include: 1) Identify individual and community impacts of opioid misuse; 2) Identify an evidence based strategy to screen and address substance misuse; 3) Identify appropriate opioid overdose recognition and response strategies.

The dates and locations for the trainings are:

- February 7 – **Mason City**
- February 11 – **Osceola**
- March 7 – **Council Bluffs**
- April 4 – **Waterloo**
- May 7 – **Burlington**
- May 16 – **Cedar Rapids**
- June 3 – **Sioux City**

The same content will be presented at each training. To register, please click on the following link: [POMW](#). Cost for the training is \$15.

## **Opioid News**

### **Newest Opioid Training for Providers**

The Centers for Disease Control and Prevention (CDC) has released the final three modules in the Applying CDC's Guideline for Prescribing Opioids interactive online training series for healthcare providers. The latest modules focus on, Opioid Use and Pregnancy, Motivational Interviewing, and Collaborative Patient-Provider Relationship in Opioid Clinical Decision Making. In these self-paced modules, providers will learn about opioid considerations in pregnancy, patient-centered communication practices and approaches to shared opioid decision-making. Each module includes clinical scenarios, knowledge feedback prompts, and a resource library to help enhance learning.

To learn more about the training series, please click on the following link: [CDC](#)

## Opioid Prescribing Rates Higher in Nonmetropolitan Areas

According to a recent report in the CDC Morbidity and Mortality Weekly Report (MMWR), opioid prescribing rates in nonmetropolitan areas are higher when compared to areas that are more metropolitan. Using de-identified data from the Athenahealth electronic health record (EHR) system, opioid prescribing rates among 31,422 primary care providers in the United States were analyzed to evaluate trends from January 2014 to March 2017. This analysis assessed how prescribing practices varied among six urban-rural classification categories of counties, before and after the March 2016 release of CDC's *Guideline for Prescribing Opioids for Chronic Pain* (Guideline). Results showed:

- Higher rates of opioid-related deaths have been recorded in nonmetropolitan (rural) areas
- In 2017, 14 rural counties were among the 15 counties with the highest opioid prescribing rates.
- Patients in noncore (the most rural) counties had an 87% higher chance of receiving an opioid prescription compared with persons in large central metropolitan counties during the study period.

Across all six county groups, the odds of receiving an opioid prescription decreased significantly after March 2016.

To read the entire article, please click on the following link: [CDC/MMWR](#)

## Upcoming Trainings:

- **Second Annual Chicago Summit for Clinical Excellence on the Opioid Crisis**  
March 4-5, 2019.  
For more information, please click on the following link: [Chicago](#).
- **NatCon19**  
March 25-27, 2019.  
For more information, please click on the following link: [Nashville](#).
- **Governor's Conference on Substance Abuse**  
April 16-17, 2019  
For more information, please click on the following link: [Des Moines](#).
- **National Rx Drug Abuse and Heroin Summit**  
April 22-25, 2019.  
For more information, please click on the following link: [Atlanta](#).