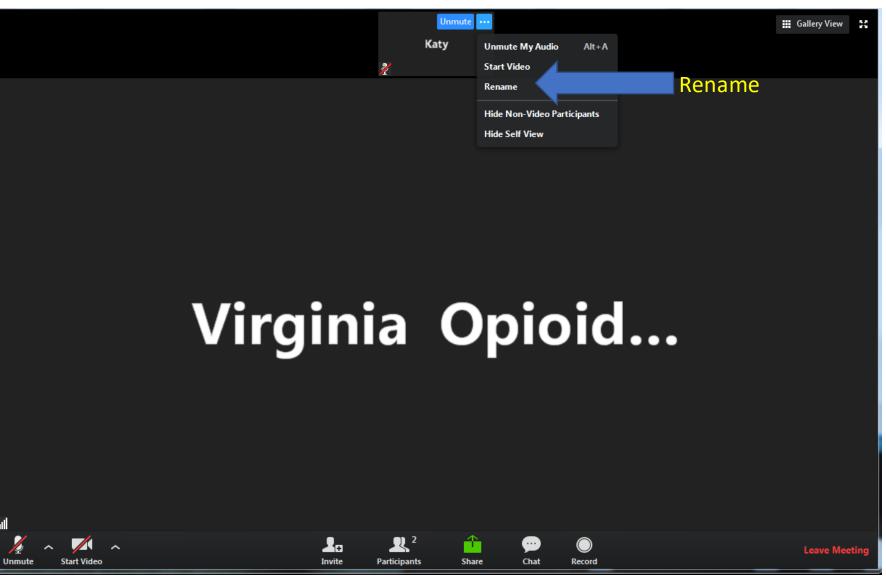


# Virginia Opioid Addiction ECHO\* Clinic June 24, 2022

\*ECHO: Extension of Community Healthcare Outcomes



# **Helpful Reminders**

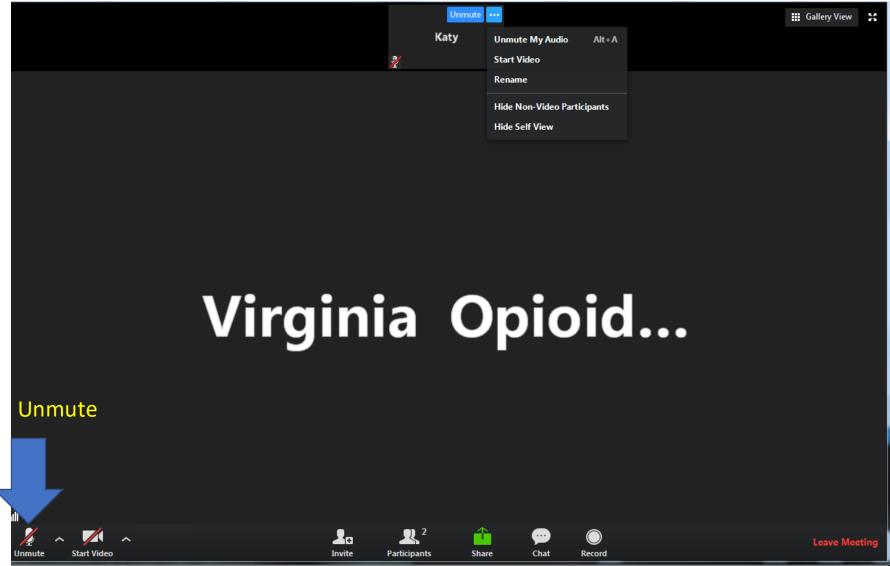




 Rename your Zoom screen, with your name and organization



## **Helpful Reminders**

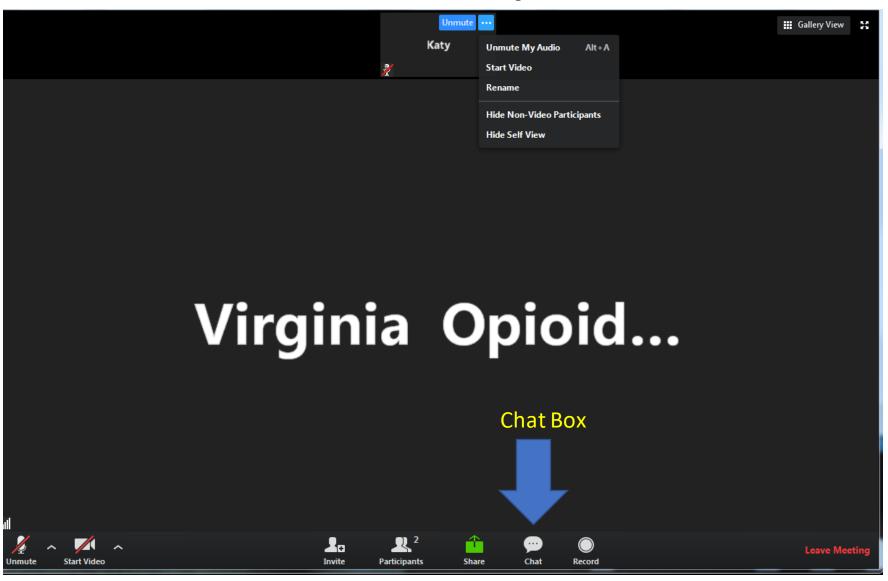




- You are all on mute please unmute to talk
- If joining by telephone audio only, \*6 to mute and unmute



## **Helpful Reminders**





- Please type your full name and organization into the chat box
- Use the chat function to speak with IT or ask questions



### VCU Opioid Addiction ECHO Clinics











- Bi-Weekly 1 hour tele-ECHO Clinics
- Every tele-ECHO clinic includes a 30 minute didactic presentation followed by case discussions
- Didactic presentations are developed and delivered by inter-professional experts
- Website Link: <u>www.vcuhealth.org/echo</u>



### **Hub and Participant Introductions**



VCU Team					
Clinical Director	Gerard Moeller, MD				
Administrative Medical Director ECHO Hub	Vimal Mishra, MD, MMCi				
Clinical Experts	Lori Keyser-Marcus, PhD Courtney Holmes, PhD Albert Arias, MD Megan Lemay, MD Katie Adams, PharmD				
Didactic Presentation	Jason Lowe, MSW				
Program Manager	Bhakti Dave, MPH				
Senior Program Coordinator	Laura Porter				
Acute Telehealth Manager	Tamera Barnes, MD				
IT Support	Vladimir Lavrentyev, MBA				

- Name
- Organization

Reminder: Mute and Unmute screen to talk

\*6 for phone audio
Use chat function for Introduction



### What to Expect



- I. Didactic Presentation
  - I. Jarrod Reisweber, Psy.D., Ed.S
- II. Case presentation
  - I. Case 1
    - I. Case summary
    - II. Clarifying questions
    - III. Recommendations
- III. Closing and questions



Lets get started!
Didactic Presentation







# Disclosures

Jarrod Reisweber, Psy.D., Ed.S. has no financial conflicts of interest to disclose.

There is no commercial or in-kind support for this activity.



# Transcending Self Therapy: Group, Individual, and Virtual Reality Treatments



## **Brief Overview**

Presenter: Jarrod Reisweber, Psy.D.

Coauthors: Kate Polak, M.S. & Brian Meyer, Ph.D.



# Disclosure

• Jarrod Reisweber, Psy.D., Brian Meyer, Ph.D., David Pomm, M.S., and Kathryn Polak, M.S. at times receive a percentage of the royalties from sales of Transcending Self Therapy books. Please know that Virginia Commonwealth University (VCU) and Veterans Affairs (VA) staff have free access to electronic versions of all books if using books and/or materials when working for VCU or the VA.

- transcendingselftherapy.com
- bfagg@vcu.edu



8

The average number of times an individual with Opioid Use Disorder goes through treatment before long term recovery.

In 2018, an estimated

2.1M

Americans needed treatments for Opioid Use Disorder.

Opioid Related Deaths rose up to

42%

nationally in 2020 compared to the same months in 2019.

Source: ODMAP

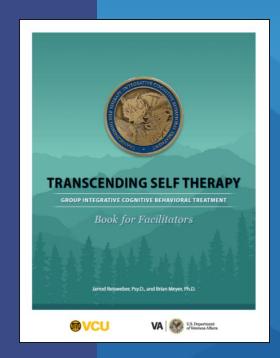
# **Group Transcending Self Therapy Program Evaluation Results**

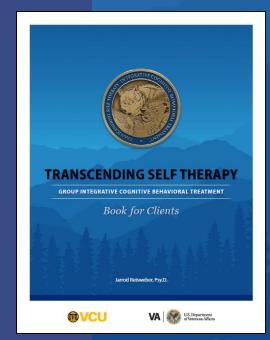
- Compared to TAU participants, group TST participants were significantly less likely to have a positive UDS during treatment and at one month post-discharge.
- Group TST patients showed knowledge gains about CBT skills, with correct answers across items ranging from 92-100%.
- Among Group TST patients, quality of life scores significantly increased by 14 points from pre- to posttreatment.

Variable	TAU	TST	<i>p</i> -value
Positive UDS during treatment	17.6%	0%	.01
Positive UDS at one month post-discharge	50%	17.6%	.044

### Patient Feedback:

- "...gave me confidence and gave me the ability to not only act and contemplate being sober but that I would have the ability to be sober."
- "...I had situations to where I would usually handle it incorrectly. But being that I'm thinking on my thought patterns and I'm seeing what's motivating my actions, I can stop them before they become negative."

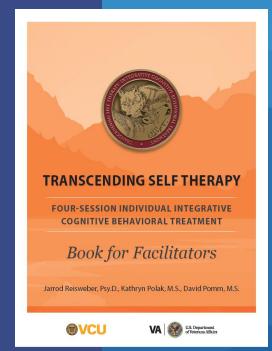


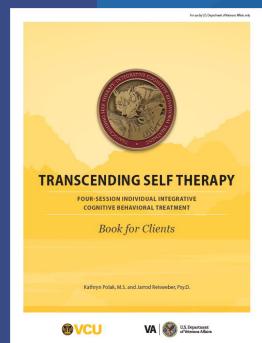


# **Individual Transcending Self Therapy Pilot Clinical Trial Results**

- Significant reduction in depression for those in Transcending Self Therapy (TST) group compared to Treatment as Usual (TAU) group.
- One estimate, if extrapolated across the year, was that this program could save McGuire VAMC over \$500,000 per year.

Variable	TST	TAU	<i>p</i> -value
Treatment retention (% completed)	100%	50%	.002
Transitioned to higher level of care	0%	22.7%	.06
Proportion of UDS positive (toxicology verified abstinence)	.25 (.38)	.51 (.46)	.10
Abstinent final week of IOP treatment	84.6%	40.9%	.01

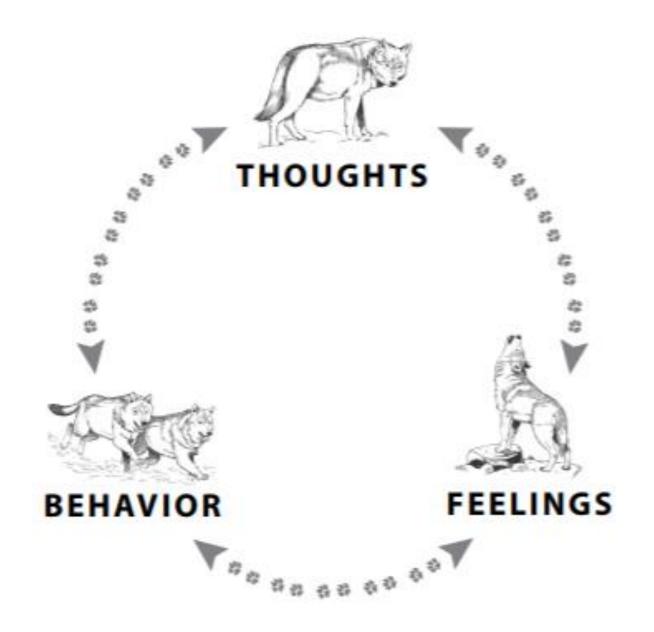




# Binomial logistic regression analyses examining substance use and treatment variables by treatment group (N=169).

Variable	% TAU ( <i>n</i> =81)	% Individual TST-I-CBT ( <i>n</i> =88)	<i>p</i> -value	OR
Treatment retention (% completed)	71.6%	81.6%	.12	.57
Transition to a higher level of care	17.3%	9.3%	.13	2.04
Positive UDS during treatment	35.9%	21.8%	.046	2.00

# Cognitive Behavioral Therapy (CBT)



TST Adds an emphasis on helping the client live life in accordance with their moral compass.

- TST takes an integrative/holistic approach
- Pulls elements from different theoretical approaches and evidence-based interventions
- Tailors treatment to individual needs

"Religion had forgotten the mind and 20th century psychology had forgotten the soul" (Hayes, 2001, p. 18).

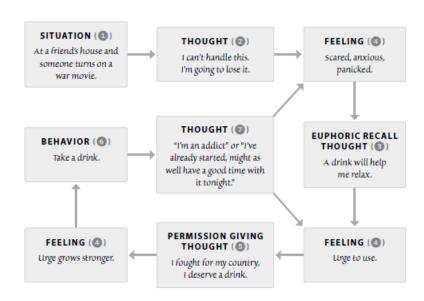
# One of the TST—Integrative CBT Sessions

### CHAIN ANALYSIS OF SUBSTANCE **USE AND INTERVENTION POINTS**

#### INTERVENTION POINTS

- People, places, and things
- Challenge negative core beliefs
- Contamination thoughts
- 4 Urge surfing
- Replacement behaviors
- O Decrease access
- Stopping the cycle before it takes out values

VALUES				
Family	Morals			
Passionate Pursuits	Dignity			



Similar to Beck, Wright, Newman, & Liese (1993) & Linehan (2015).

GROUP TRANSCENDING SELF THERAPY Book for Facilitators | Relsweber and Meyer

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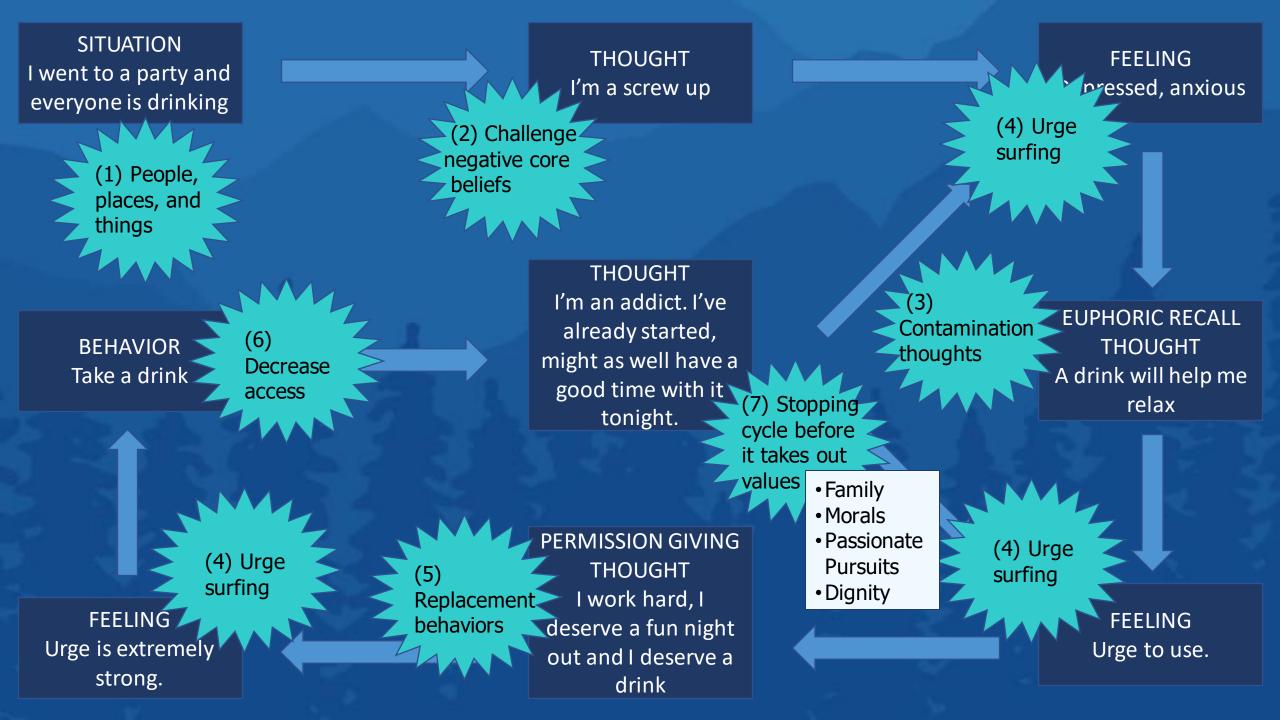
### **OUTSIDE PRACTICE: CONTAMINATION THOUGHTS**

One of the challenges in addressing problems with substance use is that the good feelings (relaxation, pain relief, etc.) are often immediate, but the consequences (health problems, relationship problems, legal trouble, etc.) are often delayed. We tend to remember the good things in the moment when a craving hits, but do not think about the downside. One way to transcend this problem is to practice using contamination thoughts.

Instructions: When you experience a craving or urge to use, think about the worst thing that has ever happened because of your substance use. How did this interfere with what you value in life (family, friends, romantic relationship, job, passionate pursuit) and disrupt your moral compass?

My contamination thought is...

Craving intensity: Before (0–10)	Situation Where were you?	Contamination thought used? Yes / No	Craving intensity: After (0–10)
8	Example: BBQ at brother's house, everyone else is drinking	Yes	3

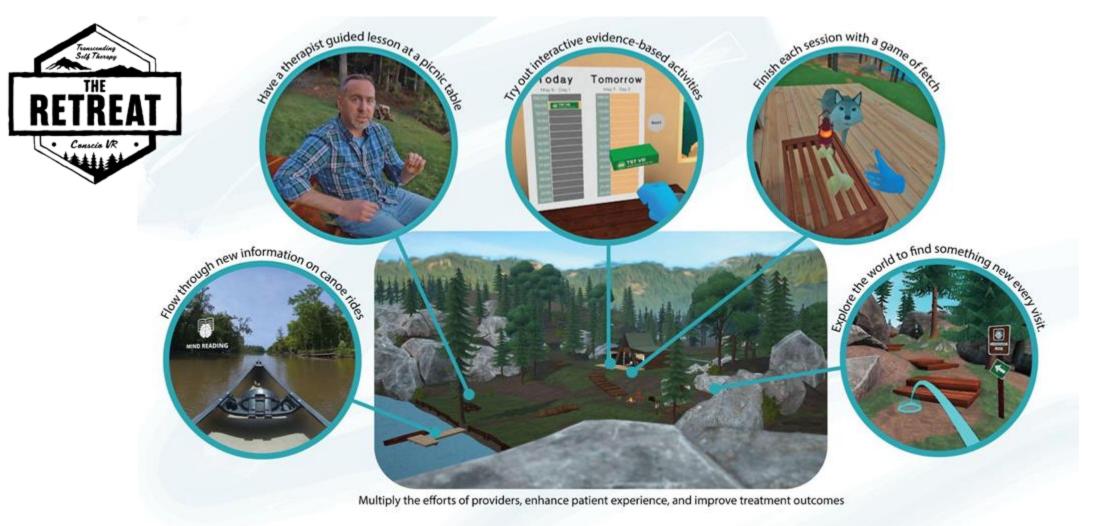


# The Effects of COVID-19 on Opioid Overdose Deaths

- A recent American Medical Association review of news reports from 40 states found that opioid overdoses have increased in 29 states in 2020 (AMA, 8/14/20)
- A just-completed *Wall Street Journal* survey found that 21 of 30 of the largest counties in the country have increases in overdose deaths (WSJ, 9/8/2020)
- A CDC survey found that 13.3% of respondents in the week June 24-30 either started or increased their substance abuse in response to COVID-19 stresses (MMWR, CDC, 8/14/20)
- The White House Office of Drug Policy found an 11.4% increase in year-over-year opioid fatalities in the first four months of 2020 (Politico, 7/2/20)

# **Transcending Self Therapy Virtual Reality**

Supplementary Virtual Reality platform that extends the therapeutic reach of a research supported Integrative CBT for patients that abuse substances.

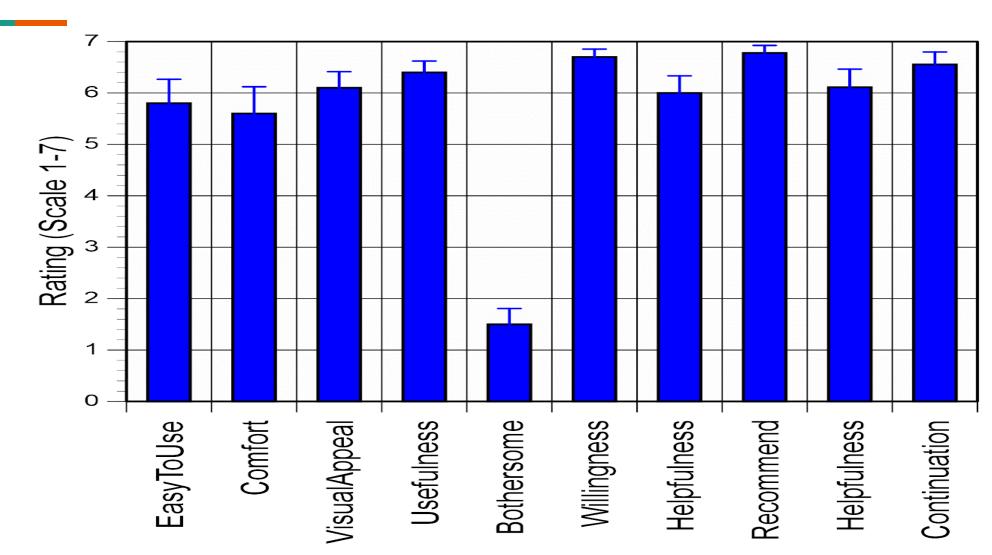


# Hypotheses—TST VR will result in:

- Improved homework motivation
- Increased homework completion
- In turn, TST VR will result in increased program completion, decreased substance abuse, and longterm recovery

TST VR is being refined and improved and spread to three additional hospitals across the country.

# Veteran VR Data on a Scale of 1 to 7 with 7 Being the Highest



# TST Training had Very Positive Reviews!

**Conducted TST** Non-VR Original **Protocol Training** for Over 1,000 VA **Providers in two Months Earlier This** Year.

### **Program Evaluation Results**

Participant Satisfaction (Standard Questions)	Strongly Disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly Agree	N/A	Statistics
Overall, I was satisfied with this	2	3	6	83	167	0	Mean: 4.57
learning activity.  I would recommend this training	(0.77)	(1.15)	(2.30)	(31.80)	(63.98) 169	(0.00)	A+SA: (95.79) Mean: 4.58
course to others.	(0.38)	(1.53)	(2.30)	(31.03)	(64.75)	(0.00)	A+SA: (95.79)
I learned new knowledge and skills from this learning activity.	(0.77)	(0.77)	(1.92)	(36.02)	158 (60.54)	(0.00)	Mean: 4.55 A+SA: (96.55)
The scope of the learning activity was appropriate to my professional needs.	(0.38)	0 (0.00)	7 (2.68)	78 (29.89)	175 (67.05)	(0.00)	Mean: 4.63 A+SA: (96.93)
The content was presented in a manner that was fair and unbiased. If not, please elaborate in comments.	(0.38)	0 (0.00)	7 (2.68)	79 (30.27)	174 (66.67)	0 (0.00)	Mean: 4.63 A+SA: (96.93)
I will be able to apply the knowledge and skills learned to improve my job performance.	2 (0.77)	1 (0.38)	8 (3.07)	89 (34.10)	161 (61.69)	(0.00)	Mean: 4.56 A+SA: (95.79)
The training environment (face to face, video conference, web based training) was effective for my learning.	3 (1.15)	3 (1.15)	11 (4.21)	96 (36.78)	148 (56.70)	0 (0.00)	Mean: 4.47 A+SA: (93.49)
	1.3	7%		95.89%			

### Research supporting TST—Integrative CBT for Substance Misuse

James M. Bjork, Jarrod Reisweber, Jason R. Burchett, Paul E. Plonski, Anna B. Konova, Silvia Lopez-Guzman & Clara E. Dismuke-Greer (2021): Impulsivity and Medical Care Utilization in Veterans Treated for Substance Use Disorder, Substance Use & Misuse.

Polak, K., Reisweber, J., Bjork, J. (2021). Multi-Site Dissemination of Four-Session Individual Transcending Self Therapy: An Integrative Cognitive-Behavioral Therapy for Substance Use Disorders. HSOA Journal of Addiction & Addictive Disorders.

Polak, K., Reisweber, J., & Meyer, B. L. (2021, November 4). Transcending Self Therapy: Four-Session Individual Integrative Cognitive-Behavioral Treatment: A Case Report. *Psychological Services*. Advance online publication. http://dx.doi.org/10.1037/ser0000539

Polak, K., Kelpin, S., Reisweber, J., Svikis, D. (2020). Evidence-based behavioral therapies for Substance Use Disorders. Primer on Substance Use Disorder. Oxford Press.

Polak, K., Meyer, B.L., Neale, Z., Reisweber, J. (2020). Program Evaluation of Group Transcending Self Therapy: An Integrative Modular Cognitive-Behavioral Therapy for Substance Use Disorders. Substance Abuse: Research and Treatment.

Polak, K., Burroughs, T., Reisweber, J., Bjork, J. (2019) Four-Session Transcending Self Therapy for substance use, depression, and treatment retention among Veterans with Substance Use Disorders: A pilot study. Journal of Addiction Research and Therapy.

# Thank you for participating!

transcendingselftherapy.com <u>bfagg@vcu.edu</u> <u>jarrodreisweber@gmail.com</u>



A grandfather was teaching his grandson about life:

"A fight is going on inside me," he said to the boy.

"It is a terrible fight and it is between two wolves. One is evil—he is anger, jealousy, sorrow, regret, greed, arrogance, self-pity, guilt, resentment, inferiority, lies, false pride, superiority, and ego."

He continued, "The other is good—he is joy, peace, love, hope, serenity, humility, kindness, benevolence, empathy, generosity, truth, compassion, and faith. The same fight is going on inside you—and inside every other person, too."

The grandson thought about it for a minute and then asked, "Grandfather, which wolf wins?"

> The grandfather quietly replied, "The one you feed."





# Questions?









• 12:35-12:55 [20 min]

• 5 min: Presentation

• 2 min: Clarifying questions- Spokes

• 2 min: Clarifying questions – Hub

• 2 min: Recommendations – Spokes

• 2 min: Recommendations – Hub

• 5 min: Summary - Hub

Reminder: Mute and Unmute to talk

\*6 for phone audio

Use chat function for questions



### **Main Question**

I would love feedback on how best to support this patient.

How do we keep her safe with polysubstance use? Meth, Buprenorphine, Adderall

Resistance to peer support and group services, how can we provide additional support?

How do we clinically provide EBP with her making little to no progress regarding her SUD.



### **Demographic Information**

31 year old Caucasian female. Currently unemployed living with her parents and daughter. Currently involved in heterosexual relationship with a person other than child's father. Reports social support from friends, some of whom are still using substances. Financially supported by parents.

### **Background Information**

Opioid Use Disorder, Severe, in sustained remission, on maintenance therapy Major Depressive Disorder, recurrent episode with anxious distress Attention Deficit Hyperactivity Disorder, combined type Methamphetamine Use

Hypertension

Tachycardia

Cushing's Disease

Prescribed narcotics at age 18-19 for kidney pain. Gradually required more medication and when unable to get it from prescribers, began using pills illicitly. Mother and father admitted patient to detox facility and she began treatment for SUD. Patient reports continued Meth use, initially to enhance sexual activity at request of her partner, now reports does not know why she continues to use.

Currently prescribed: Wellbutrin XL 150 mg, Suboxone 8-2 mg (2.5 daily), and Zofran 15 mg. Adderall 10 mg prescribed by another provider.

Patient is actively involved in therapy.

Last UDS: Expected findings- Bup, Norbup, Naloxone, Amphetamines (Adderall 10 mg prescribed by another provider for symptoms of ADHD; Unexpected findings: Methamphetamines, THC.

Patient is resistant to peer supports or group therapy.

Has no interest in refraining from Meth use.

Barriers to patient care is continued Meth use, not engaged in primary care (schedules and misses appointments).





### **Previous Interventions**

Individual therapy, psychiatric evaluation, referral to primary care and endocrinology, medication management, psychoeducation.

### Plans for Future Treatment/ Patient's Goal

Patient provided goals: Reduce substance use, engage in therapy, take medication.

We are unsure of where we will go with this patient. Patient continues to test positive for Meth even after continued services and support.

### Main Question (repeated)

I would love feedback on how best to support this patient.

How do we keep her safe with polysubstance use? Meth, Buprenorphine, Adderall
Resistance to peer support and group services, how can we provide additional support?

How do we clinically provide EBP with her making little to no progress regarding her SUD.







- Case studies
  - Submit: www.vcuhealth.org/echo
  - Receive feedback from participants and content experts
  - Earn \$100 for presenting



### Thank You

The success of our telehealth program depends on our participants and those who submit case studies to be discussed during clinics. We recognize the following providers for their contributions:

Virginia Commonwealth University

- Ademola Adetunji, NP from Fairfax County CSB
- . Tara Belfast-Hurd, MBA-PA from Department of Behavioral Health and Developmental Services
- · Michael Bohan, MD from Meridian Psychotherapy
- · Ramona Boyd, NP from Health Wagon
- Diane Boyer, DNP from Region Ten CSB
- · Melissa Bradner, MD from VCU Health
- . Kayla Brandt, B.S. from Crossroads Community Service Board
- Candace Fletcher, PharmD Candidate from Hopkins Medical Association
- Susan Cecere, LPN from Hampton Newport News
- . Kimberly Dexter, DNP from Hampton Newport News CSB
- · Shokoufeh Dianat, DO, MAS from Virginia League from Planned Parenthood
- Candace Fletcher, PharmD from Hopkins Medical Association
- . Michael Fox, DO from VCU Health
- . Shannon Garrett, FNP from West Grace Health Center
- . LaShawna Giles, MSW from Hampton Newport News CSB
- . Sharon Hardy, BSW, CSAC from Hampton-Newport News CSB
- . Kara Howard, NP from Southwest Montana Community Health Center
- Sunny Kim, NP from VCU Health
- · Heidi Kulberg, MD from Meridian Health
- · Thokozeni Lipato, MD from VCU Health
- · Caitlin Martin, MD from VCU Health
- . Jennifer Melilo, FNP from Chesapeake Integrated Behavioral Health
- . Dawn Merritt, QMHP from Eastern Shore CSB
- · Maureen Murphy-Ryan, MD from AppleGate Recovery
- . Faisal Mohsin, MD from Hampton-Newport News CSB
- Jeromy Mullins, PharmD Candidate from Hopkins Medical Association
- . Stephanie Osler, LCSW from Children's Hospital of the King's Daughters
- . Davina Pavie, QMHP from Hanover County CSB
- . Winona Pearson, LMSW from Middle Peninsula Northern Neck CSB

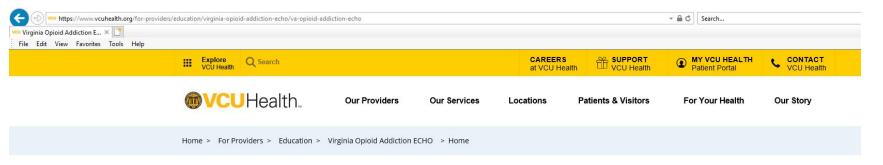
- Jennifer Phelps, BS, LPN from Horizons Behavioral Health
- Crystal Phillips, PharmD from Appalachian College of Pharmacy
- Jashanda Poe, MA from Rappahannock Area CSB
- Tierra Ruffin, LPC from Hampton-Newport News CSB
- Manhal Saleeby, MD from VCU Health Community Memorial Hospital
- Jenny Sear-Cockram, NP from Chesterfield County Mental Health Support Services
- Elizabeth Signorelli-Moore, LPC from Region 1 CSB
- Amber Sission, QMHP from Eastern Shore CSB
- Daniel Spencer, MD from Children's Hospital of the King's Daughters
- Linda Southall, QMHP from Alleghany Highlands CSB
- Heather Stone, PhD, LCSW from Central Virginia Health Services of Petersburg
- Cynthia Straub, FNP-C, ACHPN from Memorial Regional Medical Center
- Saba Suhail, MD from Ballad Health
- Michelle Tanner, LPC from Hanover County CSB
- · Barbara Trandel, MD from Colonial Behavioral Health
- · Bill Trost, MD from Danville-Pittsylvania Community Service
- Art Van Zee, MD from Stone Mountain Health Services
- Ashley Wilson, MD from VCU Health
- Sarah Woodhouse, MD from Chesterfield Mental Health
- Susan Mayorga, BA, CBIS from Community Health Center of the New River Valley
- · Jordan Siebert, Peer Recovery Specialist from Daily Planet Health Services

### Claim Your CME and Provide Feedback



- www.vcuhealth.org/echo
- To claim CME credit for today's session
- Feedback
  - Overall feedback related to session content and flow?
  - Ideas for guest speakers?







### **Virginia Opioid Addiction ECHO**



Welcome to the Virginia Opioid Addiction Extension for Community Health Outcomes or ECHO, a virtual network of health care experts and providers tackling the opioid crisis across Virginia. Register now for a



### **Network, Participate and Present**

- · Engage in a collaborative community with your peers.
- · Listen, learn, and discuss didactic and case presentations in real-time.
- Take the opportunity to submit your de-identified study for feedback from a team of addiction specialists. We appreciate those who have already provided case studies for our clinics.
- · Provide valuable feedback & claim CME credit if you participate in live clinic sessions.

### **Benefits**

TeleECHO Clinic!

· Improved patient outcomes.

101 1 1 11

· Continuing Medical Education Credits: This activity has been approved for AMA PRA Category 1 Credit™. 









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, learn more about Project ECHO					1
<b>▶</b> Watch video					1
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Addiction ECHO by VCU to colleagues?		Ery Likely			H
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		Neutral			
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	Ve	ry Unlikely			
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Wilest and table 1 of 1 o					
What opioid-related topics would you like addre	essea in the future?				
What non-opioid related topics would you be in	nterested in?				
					`

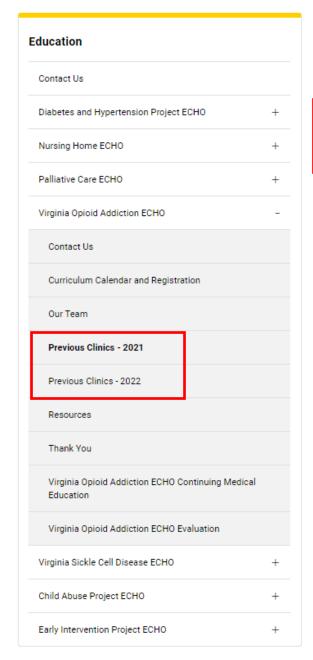




www.vcuhealth.org/echo

To view previously recorded clinics and claim credit





### Previous Clinics - 2021

Review topics we covered in previous Virginia Opioid Addiction ECHO clinics.

### January 15, Buprenorphine Taper

Presented by Masaru Nishiaoki, MD

- View Presentation
- View Video

#### January 29, Panel Discussion: COVID and Chronic Conditions

Panelists: Albert Arias, MD, Alex Krist, MD and Katherine Rose, MD

- View Presentation
- View Video

#### February 12, Grief Impacting Recovery

Presented by Courtney Holmes, PhD

- View Presentation
- Video Video

#### February 26, Virginia Drug Court System

Presented by Melanie Meadows

- View Presentation
- View Video

#### March 12, COVID and Recovery: Panel Discussion

Presented by Tom Bannard, MBA Omri Morris, CPRS Raymond Barnes, CPRS Erin Trinh, CPRS

- View Presentation
- View Video

#### March 26, Effects of Pharmacology on Cognitive Function

Presented by Gerry Moeller, MD

- View Presentation
- View Video
- View Resource

April 9, PropER Clinic and SUD Virtual Bridge Clinic: Linking Patients from ED to PCP and SUD Care
Presented by Taruna Aurora, MD and Brandon Wills, MD

View Presentation









Bi-Weekly Fridays - 12:00 - 1:00PM

### **Mark Your Calendar --- Upcoming Sessions**

\*\*Last 2 sessions until Fall!\*\*

**July 8:** Considering Supervised Consumption Sites in the U.S. Beau Kilmer, PhD

**July 22:** Buprenorphine Home Induction Brandon Wills, MD & Theresa Davis, FNP

Please refer and register at vcuhealth.org/echo





### THANK YOU!

Reminder: Mute and Unmute to talk

\*6 for phone audio

Use chat function for questions

