Dear Colleague:

I need your help. North Carolina, like the rest of the nation, is experiencing an opioid epidemic, and its harmful effects are clear. We arrived at this unfortunate place on a path paved with good intentions. Nearly two decades ago, physicians and other clinicians were encouraged to treat pain more aggressively, sometimes without proper safety guidelines and training. Similarly, patients were incorrectly counseled that all pain could be readily and quickly controlled without long-term negative impacts. We now know that these along with complex social and economic factors and the highly addictive properties of opioids have created a perfect storm resulting in this crisis.

The results have been devastating. More than 13,000 North Carolinians have died unnecessarily from unintentional overdoses since 1999. Communities in North Carolina are being ravaged by opioids. Our state dispensed nearly 10 million opioid prescriptions last year alone. Yet, pain severity reported by patients remains unchanged. Prescription opioid use disorders are contributing to increased use of heroin and fentanyl, a powerful synthetic drug 50 to 100 times more potent than morphine. Additionally, illicit opioid use contributes to the spread of illnesses such as HIV and hepatitis C.

Although solving the opioid crisis will not be easy, our state is uniquely positioned to help end this epidemic. At DHHS and across Governor Cooper’s administration, we are working in a coordinated fashion to ramp up prevention, treatment and recovery efforts. But, we can’t do it alone – we need your help.

In line with the U.S. Surgeon General’s recent pledge to Turn the Tide – we are asking that you join us in taking the following important steps:

- Visit CDC’s Guideline for Prescribing Opioids for Chronic Pain. This guideline has been adopted by the NC Medical Board, and free provider trainings and presentations are now underway.
- Register with and utilize the NC Controlled Substance Reporting System (CSRS) to review patient prescription histories and incorporate them into clinical best practices around prescribing.
- Use DEA compliant e-prescribing software where possible to communicate prescription orders more securely and accurately, especially for drugs that are prone to abuse and diversion.
- Screen patients to determine risk for or presence of opioid use disorder, and provide or connect them with evidence-based treatments. This web link contains many useful resources.
- Transform perceptions about addiction by talking about it and treating it as a treatable chronic disease.

We all have an obligation to step forward and address the opioid crisis head-on in North Carolina. The health of our communities depends on it.

Thank you for your leadership.

Mandy Cohen. MD. MPH
Secretary

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