

Clinic to offer medication-assisted treatment

OPIOIDS continued
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Guest speaker Eric Martin, a nationally certified addictions counselor, has 32 years of experience and is also an international presenter and recovery advocate.

“The United States is the number one overdose death country in the world,” Martin said. “Drug overdose deaths are highest amongst young people.”

National nonprofit Mental Health America ranked Oregon as the state with the highest rate of mental health and substance use problems. Gov. Kate Brown declared addiction and substance abuse to be a public health crisis in March.

In response to the nationwide opioid epidemic, the U.S. Senate passed an \$8.4 billion opioid package bill with much of the federal funding going to medication-assisted treatment, Martin said.

“It was the largest amount of cash for addiction services ever,” he said. “Some of that is for medication-assisted treatment with suboxone and methadone, the largest expansion ever. ... But methadone clinics are very expensive to start up, which is a good reason to look at suboxone. It’s also incredibly safe.”

Methadone has been used to treat heroin addiction since the 1950s and suboxone, a combination of buprenorphine and naloxone, was first approved for use in the United States in 2002.

The Health & Wellness Center hopes to begin offering medication-assisted treatment in January. Rowe said it will not replace abstinence-based programming, just add to what is already in place.

“This is just another tool in our toolbox,” she said. “This is another part of the program.”

When it comes to providing access to treatment and recovery support services for those with substance use disorders, Oregon ranked last in the nation.

“The critical part of treatment is right at the beginning,” Martin said. “Oregon has some of the best treatment in the United States,



Photos by Danielle Frost

Nationally certified addictions counselor Eric Martin discusses efforts to reduce opioid dependence during a town hall-style discussion in the Tribal gym on Thursday, Dec. 13. He also conducted a staff training at the Tribe’s Health & Wellness Center earlier that day.



Nationally certified addictions counselor Eric Martin is gifted a Pendleton blanket by Executive Health Services Director Kelly Rowe and Chemical Dependency Counselor Joe Martineau after a town hall-style discussion on efforts to reduce opioid dependence.

but a lot of people think it is awful because of the long wait for a bed. ... It takes two to six months. By the time the bed opens, that person is usually long gone.”

He added that if a person can get into treatment, many opioid-dependent people drop out within 72 hours of starting the program due to the severity of withdrawal symptoms.

“That is why we have methadone and suboxone,” Martin said. “These medication programs were started because the counselors couldn’t get

them to stay in a program.” Although almost every recovery program includes medication-assisted treatment for up to a few months, opioid-dependent individuals often need it for much longer to avoid relapse.

“This has been frowned upon in the recovery community and we have stigmatized and rejected them,” Martin said. “The problem people have with drug treatment for opioids is the length of time it takes. The average is two years. There is a common belief that people are on medication-assisted treatment for decades. ... Instead of rejecting them, we should bring them closer and hopefully inspire them to a completely clean and sober lifestyle. Pushing them away leads to isolation.”

Martin said that if President Donald Trump gets his wish and builds a wall separating the United States and Mexican borders and the heroin supply coming from Mexico gets cut off, it will lead to far greater problems as addicts will seek synthetic opioids like fentanyl, which is 80 to 100 times stronger than morphine.

Pharmaceutical fentanyl was originally developed for pain management of cancer patients and applied in a patch on the skin. However, it is also used illegally to increase heroin’s potency and disguised as a prescription opioid. According to the Drug Enforcement Administration, many users believe that they are purchasing heroin, which often results in overdose deaths.

“Some types are so strong that overdose medications like naloxone, which reverses the effect of an opioid overdose, doesn’t work,” Martin said. “This is another reason why we need medication-assisted treatment. If you take drugs after suboxone, you don’t get high. If an addict tries to use OxyContin or Vicodin, nothing happens.”

To be prescribed suboxone, a person must be in withdrawal.

“We have a psychiatric nurse practitioner on board who has provided these services (elsewhere) for years,” Rowe said. “The idea is that if we are paying for this, the ability to bring it here and have it local at the clinic is helpful. This is a tool so people don’t have to travel to Dallas or Beaverton to get the recovery services they need.”

After the meeting concluded, a panel discussion was held that included Chemical Dependency Counselor Joe Martineau, recovering addicts, Grand Ronde Tribal members Denise Haskins and Ronald Johnson, and Health & Wellness Dr. Paul Vitt. All agree that medication-assisted treatment would be helpful to add to the clinic’s services.

“This is different than our abstinence-based programming,” Rowe said. “We want to look at how we can help the most people in our community. The conversation we’ve had tonight informs us. We’re all about wanting to make people well and healthy.”

In addition, in late October Tribal Council approved hiring a legal firm to represent the Grand Ronde Tribe in a multi-district opioid litigation on a contingency fee basis. ■

Grand Ronde Housing Department



Board seeks community input

The Grand Ronde Housing Board is inviting Tribal members and Tribal housing residents to provide input to assist its members in carrying out its advisory role to the Housing Department and Tribal Council regarding policy guidance. The Housing Board meets at 3 p.m. the third Thursday of each month in the Housing Department conference room, 28450 Tyee Road. Its chair is Kristy Criss-Lawson. For more information, contact the Housing Department at 503-879-2401. ■

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