



The G.A.P. Network

A program of Prevention Action Alliance

An Interview with Surgeon General Jerome Adams, M.D., M.P.H.

One of our goals with The G.A.P. Network is to end addiction to prescription drugs and opioids in Ohio. We believe having the full support and influence from the Surgeon General is vital to informing policy makers and the general public of the severity of the opioid epidemic and best practices moving forward to confront it. We are glad to hear that this matter is a top priority for him during his term as Surgeon General.

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The 20th Surgeon General of The United States, Jerome Adams, MD, MPH, was sworn into office on September 5th, 2017. “Four people will die from overdoses in the time we’re having this conversation today,” Adams said Wednesday at a Harvard T.H. Chan School of Public Health Voices in Leadership webcast. “That’s what I’m focused on foremost.”

The opioid epidemic is U.S. Surgeon General Jerome Adams’ top priority, and he intends to use his position’s bully pulpit to make effective change in our nation’s strategy. He has

What is an effective treatment program?

“I’m going to be honest, there are a lot of bad treatment programs out there”, Adams said stressing that we have to be responsible consumers; that it is going to take researching several programs extensively to find one that is properly

publicly shared his own family's fight with addiction, including stories of his brother who has been jailed as he fights substance misuse.

Advising policymakers is more than merely citing medicine journals, he said it's important to understand that science and policy are two circles of a Venn diagram and to find where they overlap is where opportunities for change exist. "We need to make the overlap."

"We have to do a better job promoting the science of influencing policy – figuring out how we can be more effective and not just beating people over the head with science, science, science and doing what Einstein said is insanity, doing the same thing and expecting a different result." Adams said.

Adams said that there are three areas he is focused on.

1) The life saving power of Naloxone. Adams wants to increase the availability of Naloxone, which can reverse the effects of an opioid overdose. "We have to help folks understand that naloxone saves lives and that it's a critical first step to connecting people to care," Adams said. He drew the analogy that naloxone is the tourniquet that a first-responder would use as when they first enter a trauma scene.

2) Educate people on the epidemic's severity and the correct steps to respond. "Treatment absolutely is effective and is the only way we are going to dig out from under this epidemic," Adams said, but it's important to direct and connect people to vetted and qualified programs. Adams said his office is currently developing a directory of programs that they deem qualified to treat this epidemic effectively.

3) Prescription and prevention. As a Doctor of Medicine, Adams calls upon his colleagues to strictly follow CDC guidelines, prescribe responsibly, and become trained in treating substance use disorder.

Adams said that they are not going to be solving this problem from Washington D.C. They can provide funding, expertise, and lower barriers, but at the end of the day this problem is going to be solved on the community level. It must be an all hands-on deck solution.

[Learn more about The Surgeon General](#)

qualified. There are three qualifying factors Adams wants people to look for in a treatment program.

1) Personalization

Every addiction story is different. You should find a program that takes the time and puts in the effort to evaluate, diagnose, and treat you based on your own individual story. Do not accept a one size fits all approach because there isn't one.

2) An array of FDA approved options and medications

Effective treatment programs have access to proven medications such as buprenorphine, naltrexone, and methadone. Yes, there are recovery stories that didn't include treatment medicine, however, to have that option available if need be is what we should strive for. In addition, an array of behavioral intervention services. You want to make sure any other illness are being considered during your treatment. Programs ought to look at addiction as a chronic disease. "Recovery takes a lifetime", Adams said when reminding us that recovery doesn't end after 6 months, or even a year.

3) Full array of Recovery Support Services

Effective programs ought to understand that you're not going to be successful in treatment if you don't have a job, if you're starving, or if you're stressing about transportation.



Questions?

Contact Tyler Begley, Community Support Specialist, at tbegley@preventionactionalliance.org or at 614.540.9985, ext. 19.

Prevention Action Alliance

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Create a great offer by adding words like "free" "personalized" "complimentary" or "customized." A sense of urgency often helps readers take an action, so think about inserting phrases like "for a limited time only" or "only 7 remaining!"