

ADEA Policy Brief

Update on Dental Education's Role in the Opioid Crisis: Dental Schools Take Charge in Combating the Opioid Epidemic

ADEA Office of Policy and Research

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Executive Summary

The opioid epidemic continues to be a leading public health crisis in the United States. According to the Centers for Disease Control and Prevention (CDC), 68% of the more than 70,200 drug overdose deaths in 2017 were related to opioids.¹ Although dentists have been identified as one of the leading prescribers of opioids,² dental educators and academic dental institutions have taken action to curtail the opioid epidemic and drug misuse through innovative educational curricular and clinical changes. ADEA's commitment to advancing the role of dental education in the prevention of opioid prescription drug misuse led to the development and dissemination of the *ADEA Opioid Dental School Survey* in January 2019 to the 66 U.S. dental schools, resulting in a 70% overall response rate. This data brief supplements the March 2018 ADEA Policy Brief, *The Role of Dental Education in the Prevention of Opioid Prescription Drug Misuse*, and presents the overarching findings of the *ADEA Opioid Dental School Survey*.

- Factors influencing curricular changes ranged from specific state regulations/mandates (29%), the Commission on Dental Accreditation (CODA) Standard 2-24 for Dental Education Programs³ (30.7%) and expectations from the university or academic health center to address the opioid public health concern (20.9%). (Note: Participating schools could select more than one option.)
- 65.2% reported that subjects concerning substance abuse/substance abuse disorder/addiction and management of acute pain are covered in their current predoctoral didactic curriculum.
- The instruction of Screening, Brief Intervention and Referral to Treatment (SBIRT), an evidence-based practice used to identify and reduce abuse of and dependency on illicit drugs, was a recurring theme identified by most of the respondents as a critical change and integration into the curriculum.
- Schools providing continuing dental education to practitioners indicated adding or updating pain management courses (89.6% of respondents).

"We have been particularly hard hit by the opioid epidemic, and it is vitally important that our future and current dental health workforce be fully aware of the impact that we can have on solving this problem."

—A Respondent From a Southern Region Dental School

"The most impactful change has been the general increase in awareness among students and faculty regarding safe prescribing practices."

—A Respondent From a Central Region Dental School

Dental School Curricular Changes

Students primarily conduct their first and second years of dental school training in the classroom. Therefore, ADEA assessed how dental institutions have responded to the opioid epidemic through curricular changes. Among the responding dental institutions:

- 59.4% indicated implementation of curricular changes in response to the opioid epidemic.

Clinical Protocol Changes in School-based Clinics

Dental students under the supervision of faculty dentists provide patient care to a significant number of patients in school and affiliated clinics. In 2018-19, U.S. dental school clinics had over 2,931,000 dental visits, of which 86% were in the dental school clinics and 14% were in extramural facilities.³ Academic dental institutions have aggressively placed safeguards within dental school clinics to

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prevent opioid prescription misuse and dependence among high-risk patients. For example, 70.9% of schools reported always checking Prescription Drug Monitoring Programs (PDMPs) when prescribing controlled substances in school-based clinics. Enforcing PDMPs to be checked by dental educators is prime evidence of how dental schools are using technology and state-based surveillance systems to curb the opioid epidemic while training the future generation of practicing dentists.

“We have modified clinical prescribing guidelines to match the regulations instituted within our state.”

—A Respondent From a Western Region Dental School

According to the ADEA Opioid Dental School Survey:

- Out of responding dental schools, 61.3% indicated that clinical protocol changes were implemented in response to the opioid epidemic, and an additional 32.3% reported that changes were in progress.
- Twenty-nine schools described that protocols/policies have changed or would change in all school-based clinics.
- Of those 29 schools, 44.8% reported a documented reduction in the prescribing of opioids in school-based clinics.

Best Practices Among Academic Dental Institutions

A main objective of the *ADEA Opioid Dental School Survey* is to share dental schools' best practices that underscore the concerted effort to address this public health issue. The following quotes illustrate impactful changes undertaken at some dental schools in response to the opioid epidemic:

- “In addition to curricular lectures, we have had Drug Enforcement Agency (DEA) agents as well as the manufacturers of [Naloxone] (medication used to block the effects of opioids) to give mandatory presentations to our students. Faculty participation was encouraged.”

- “We trained our students and faculty with the help of case workers for [substance use disorder] patients, how to manage these and similar patients. We conduct SBIRT assessments for those patients who demonstrate some risk for opioid/drug abuse in order to determine the best strategy for management of their drug vulnerability.”
- “Our school of dentistry is working closely (by sole-source contract) with our state Medicaid program to provide comprehensive dental care as part of the management of our State Opioid Use Disorder Medicaid clients. Our dental providers have been especially trained how to address the oral health needs of these patients in a manner that is consistent with their emotional and medical requirements.”
- “Perhaps the most immediately impactful change has been to implement training for faculty and students about the crisis in our state, and state-sponsored initiatives, including mandatory enrollment and participation with the state prescription drug monitoring program.”
- “We have changed our prescribing philosophy. We now use more non-narcotic medications and when we do use narcotics, it's prescribed in small dosages and used with other medications as a supplement or recovery dose only.”

Each year, over 6,000 graduates of U.S. dental schools enter practice or advanced training.⁴ Dental educators have played a critical role in equipping the next generation of dentists to prevent prescription drug misuse and refer at-risk patients to evidence-based pain management programs. ADEA is committed to collaborating with its member academic institutions to elevate the importance of shaping curriculum and clinical protocols to halt the opioid epidemic and enhance the delivery of oral health care to the public.

Visit adea.org/OpioidEpidemic for resources and current information.

References

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