

NATIONAL ACADEMY OF MEDICINE: ACTION COLLABORATIVE ON COUNTERING THE U.S. OPIOID EPIDEMIC

Statement from the American Pharmacists Association (APhA)

The American Pharmacists Association (APhA) supports the Mission, Goals, and Statement of Principles of the Action Collaborative on Countering the U.S. Opioid Epidemic (hereinafter, "Action Collaborative"). Like the Action Collaborative, APhA is committed to the development, curation and dissemination of multi-sector solutions designed to reduce opioid misuse, and improve outcomes for individuals, families and communities affected by the opioid crises. APhA is currently engaged in many initiatives that align with the four goal areas of the Action Collaborative: providing education and training; promoting appropriate prescribing and evidence standards; engaging in prevention, treatment and recovery efforts; and publishing research and engaging in efforts to develop quality metrics. APhA looks forward to joining the Action Collaborative as a network organization.

Our goals and commitments to action in countering the opioid epidemic are supported by our House of Delegates policies¹ on education of pharmacists and expanding access to appropriate pain management, use of opioid reversal agents, and treatment for substance use disorder; appropriate use of PDMPs; harm reduction strategies; use of quality metrics to improve outcomes; and, engagement of pharmacists as recognized and value members of team-based and community care delivery. APhA's strategic focus is two-fold in promoting effective, evidence-based pain management, including access to medications for patients with legitimate needs, while also working to address the myriad of issues related to the opioid epidemic.

In implementing our policies, APhA works closely with our members to provide educational and collaborative opportunities, such as the APhA Pain Institute 2019: Cultivating an Empathetic and Holistic Approach to Pain; the APhA Palliative Care and Addiction Special Interest Group; Generation Rx; and the APhA Institute on Substance Use Disorders. In addition, APhA offers countless continuing education opportunities through webinars and other publications. APhA also works with other associations, such as the American Society of Addiction Medicine and the American Academy of Addiction Psychiatry, and government agency, such as the Centers for Disease Control and Prevention and the National Institute of Drug Abuse, among others.

Looking to 2019 and beyond, APhA also intends to provide additional continuing education through a variety of mediums, enhance collaborative efforts with the Providers Clinical Support System (PCSS), Allied Against Opioid Abuse (AAOA) and State Targeted Response Technical Assistance Consortium (STR-TA) and to publish research on pain management and substance use disorder. In addition, APhA commits to releasing resources to assist pharmacists discussing

¹ See American Pharmacists Association (2018), House of Delegates Policy and Procedure Handbook, available at: https://media.pharmacist.com/hod/APhA Policy and Procedures 2018.pdf

naloxone with patients and better understand opioid overutilization policies. APhA will continue to make these and other opioid-related resources easily accessible via our Opioid Use and Misuse Resource Center.

APhA appreciates the efforts of the Action Collaborative and recognizes the important role it is serving in providing an opportunity for organizations across the country to discuss, share plans of action and collaboratively accelerate change in reversing the opioid epidemic.

About the American Pharmacists Association

APhA, founded in 1852 as the American Pharmaceutical Association, nearly 60,000 pharmacists, pharmaceutical scientists, student pharmacists, pharmacy technicians, and others interested in improving medication use and advancing patient care. APhA members provide care in all practice settings, including community pharmacies, physicians' offices, hospitals, long-term care facilities, community health centers, managed care organizations, hospice settings and the uniformed services.

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