

— Atlanta, GA • March 28-31, 2016 —  
**NATIONAL**  
**Rx DRUG ABUSE & HEROIN**  
**SUMMIT**  
NationalRxDrugAbuseSummit.org

*The largest national collaboration for those impacted by Rx drug abuse & heroin use.*

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## Summit Spotlight:

### [Snap, Post and Share your 6-word story at CDC/ARC booth](#)

An interactive exhibit at the 2016 National Rx Drug Abuse & Heroin Summit will produce opportunities to engage, share and inspire, plus spread the word via the Summit's Twitter and Facebook pages. Attendees are invited to create six-word stories, snap photos of themselves and their stories in the exhibit photobooth, and share with followers and others using hashtags [#RxSummit](#) and [#RxProblem](#). Storytelling-social media style-delivers life-changing messages in an instant. The exhibit developed by CDC's National Center for Injury Prevention and Control, the Appalachian Regional Commission (ARC), and Oak Ridge Associated Universities (ORAU) demonstrates social media outreach through user-generated content. Organizations serving the Appalachian Region will be offered an opportunity to participate in a pilot training program developed by ARC and ORAU to build organizational ability to use social media to meet communication and audience engagement goals. Find out about best practices and trainings available by visiting the exhibit in **booths 305 and 307**.

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### [Thought-Leader Roundtables round out Summit agenda](#)

Eight [Thought-Leader Roundtables](#) designed to go in-depth on challenges impacting Rx drug abuse and Heroin use are scheduled on Thursday, March 31. These engaging sessions are designed around peer learning and actively encourage participation from each attendee. Facilitators are available to guide the discussion, but the real learning comes from the ideas generated by attendees.

[Learn More](#)

# Top Stories in the News:

*Disclaimer: Articles and links within articles do not necessarily reflect the views or opinions of the National Rx Drug Abuse & Heroin Summit or Operation UNITE.*

## [Reducing the risks of relief - The CDC opioid-prescribing guideline](#)

*Dr. Thomas Frieden & Dr. Debra Houry, The New England Journal of Medicine*

On March 15, 2016, the **Centers for Disease Control and Prevention (CDC)** released a [Guideline for Prescribing Opioids for Chronic Pain](#) to chart a safer, more effective course. The guideline is designed to support clinicians caring for patients outside the context of active cancer treatment or palliative or end-of-life care. More research is needed to fill in critical evidence gaps regarding the effectiveness, safety, and economic efficiency of long-term opioid therapy. However, given what we know about the risks associated with long-term opioid therapy and the availability of effective nonpharmacologic and nonopioid pharmacologic treatment options, the guideline uses the best available scientific data to provide information and recommendations to support patients and clinicians in balancing the risks of addiction and overdose with the limited evidence of benefits of opioids for the treatment of chronic pain.

[Read the CDC's full Guideline for Prescribing Opioids for Chronic Pain with supplementary information, as published in \*The Journal of the American Medical Association\*.](#)

**A discussion about the development of the CDC's opioid prescribing guidelines for chronic pain in primary care will take place in the [Clinical Track breakout session of the Summit on Tuesday, March 29.](#)**

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## [Film examines problem of drug-dependent babies](#)

*WBIR*

Located at a crossroads for drug trafficking where I-40 and I-75 meet, Knox County (TN) is facing new challenges related to the effects of pill addiction. Though the region has been historically prone to substance abuse, it has exhibited an unprecedented shift towards dependence on prescription pain medication in the last decade. A major symptom of this development is the simultaneous rise in the rates of neonatal abstinence syndrome (NAS), a condition where babies are born dependent on controlled substances due to their mothers' drug use during pregnancy. *Reaching Recovery: Pregnancy and Addiction in East Tennessee*, a 32-minute student and faculty produced documentary from Land Grant Films at the University of Tennessee, examines this problem through legal, medical, and social perspectives while documenting the difficulties mothers face in seeking treatment.

[Read Story](#)

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## [States move to control how painkillers are prescribed](#)

Barry Meier & Sabrina Tavernise, *The New York Times*

A growing number of states, alarmed by the rising death toll from prescription painkillers and frustrated by a lack of federal action, are moving to limit how these drugs are prescribed. On Thursday, March 10, Massachusetts lawmakers passed a bill [that was signed into law March 14, [read story](#)] that would sharply restrict the number of pain pills a doctor can prescribe after surgery or an injury to a seven-day supply. Officials in Vermont and Maine are considering similar actions, and governors across the country are set to meet this summer to develop a broad approach that could reduce the use of painkillers like OxyContin, Percocet and Vicodin. The states' push points to a looming change affecting how doctors use narcotic painkillers, or opioids, which are the most widely prescribed class of medications in the United States. The move comes against the backdrop of a public health crisis involving heroin-related overdoses.

[Read Story](#)

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## [A small town wonders what to do when heroin is 'everywhere'](#)

Melissa Block, *NPR Weekend Edition*

The epidemic of opioid abuse that's swept the U.S. has left virtually no community unscathed, from big cities to tiny towns. In fact, drug overdose is now the leading cause of injury death in this country: more than gun deaths; more than car crashes. I went to rural Berks County in southeast Pennsylvania to hear what the opioid epidemic means in a small town, a place where everyone knows everyone and the ripples of addiction spread wide. Really, I could have gone just about anywhere. No community is immune.

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