

Will Telemedicine Help Put off the Flames of Addiction Surge Amidst the Covid-19 Pandemic

Vijaya L Kankanala^{1*} and Brittany Dee Mueller²

¹Primary Care Physician, Presbyterian Medical Group, NM, USA

²Primary Care Physician, Atlantic Medical Group, NJ, USA

***Corresponding Author:** Vijaya L Kankanala, Primary Care Physician, Presbyterian Medical Group, NM, USA.

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Treatment of substance abuse disorders amidst the crisis of COVID-19 has presented us with novel challenges. The disruption of our daily routines due to the pandemic has hit those with substance abuse particularly hard. Over 81,000 overdose deaths occurred in the United States in the 12 months preceding May 2020, the highest numbers ever recorded in a 12-month period according to data from CDC [1]. While overdose deaths were already on the rise preceding this pandemic, the number of overdose deaths had a significant acceleration during this time. At every turn, this pandemic has imposed more and more challenges for the people with substance abuse.

The pandemic is just not about treatment and management of COVID-19. It is a multidimensional problem which has allowed us to see with a different perspective the many other challenges we face on a day-to-day basis - of which addiction crisis is a one. Multiple factors set a perfect storm for the collision of the epidemic that is the addiction crisis with the pandemic of COVID-19. The pandemic has exacerbated the sometimes limited social and family interactions that addicts face, especially if their addiction has caused fractures in their personal relationships. There was also a vast economic recession causing hundreds and thousands of people to lose their jobs, in addition to the uncertainty surrounding COVID-19, which has provoked a lot of anxiety and depression in the general public. Considering many addicts suffer from concomitant mental health issues, all these problems have only become more prevalent, as they are a very vulnerable population. The closure of treatment facilities and limited options for in person therapy has pushed many recovering addicts back towards substance abuse, as they were not able to easily find the support they needed [2]. As a matter of fact, the anxiety, depression, and boredom associated with the disruption of daily routine can predispose even non-substance users to initiate drug use and therefore exacerbate the potential for addiction.

The pandemic has spurred some new innovations in the delivery of medical care to the general patient population. Although challenging and with its own limitations, health care providers and patients are navigating these rapidly changing systems changes with a fair amount of success. It has become more possible to care for substance use patients with the Federal government loosening the rules of telemedicine. Shifting to online care has been a huge help especially for people who needed to travel long distances to seek medication assisted treatment, with minimal delay in providing medication due to decreased wait times, and longer duration in the supply of refills to hopefully promote better adherence.

Improving access to medication assisted treatment for opioid use disorder which comprises the use of medications (such as methadone, buprenorphine and naltrexone) with psychosocial and other behavioral health support is the critical component of HHS strategy

[3]. We all know from past experiences that addiction is best treated by a combination of medications and behavioral therapy. Anonymous groups play a major role in the treatment and therefore not having in person gatherings has a significant impact on the addiction treatment outcomes.

While Telemedicine has its own benefits of providing care in a much more accessible way it has its own limitations. Not all patients have ready access to technology or the power supply/wi-fi needed to operate a device. New patients may lose out from remote care as the in-person doctor to patient relationship has never been built and they may be wary of sharing personal information with someone they have never physically met [4].

Another big challenge of telemedicine is the difficulty and delay in obtaining routine drug screenings, which are often central to the treatment protocols for substance use [4]. It is a huge adjustment for health care providers to gauge the severity of this situation and prescribe the medications while making sure there is no scope for misuse of medications prescribed. The options of electronic pill dispensers can be of significant help to counteract this problem as these are connected to the internet and can be monitored if someone is tampering with them [4].

Although the DEA has exempted providers from the in person medical requirement as a prerequisite to prescribing or otherwise dispensing controlled substances via telemedicine, a lot of barriers and challenges are yet to be addressed and much more be learned.

Conflict of Interest

None.

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