

Committee on Evaluating the Effects of Opioids and Benzodiazepines on All-Cause Mortality in Veterans

MEETING 1

February 3, 2023 1:00 pm to 3:00 pm ET

COMMITTEE AGENDA

2:45 - 3:00	Public Comments Please make comments via the Slido link on the meeting webpage
2:30 - 2:45	Congressional Request Emily Blair Rubright, U.S. Senate Committee on Veterans' Affairs
2:00 - 2:30	Overview of Available Data Sources Jodie Trafton, Program Evaluation and Resource Center for the VHA Office of Mental Health and Suicide Prevention
	Friedhelm Sandbrink, Pain Management, Opioid Safety and Prescription Drug Monitoring Programs (PMOP), Specialty Care Program Office, Veterans Health Administration
	Jodie Trafton, Program Evaluation and Resource Center for the VHA Office of Mental Health and Suicide Prevention
1:05 - 2:00	Charge to the Committee and Background on Section 204a Hannon Act David Atkins, VA Health Services Research and Development
1:00 - 1:05 pm	Welcome and Introductions; Conduct of the Open Session Brian Strom, Committee Chair

A NOTE TO ATTENDEES

This meeting is being held to gather information to help the committee conduct its study. This committee will examine the information and material obtained during this, and other public meetings, in an effort to inform its work. Although opinions may be stated and lively discussion may ensue, no conclusions are being drawn at this time, and the committee will deliberate thoroughly before writing its draft report. Moreover, once the draft report is written, it must go through a rigorous review by experts who are anonymous to the committee, and the committee then must respond to this review with appropriate revisions that adequately satisfy the Academies' Report Review Committee and the NAS president before it is considered an official Academies report. Therefore, observers who draw conclusions about the committee's work based on today's



discussions will be doing so prematurely. Furthermore, individual committee members often engage in discussion and questioning for the specific purpose of probing an issue and sharpening an argument. The comments of any committee member may not necessarily reflect the position he or she may actually hold on the subject under discussion, to say nothing of that person's future position as it may evolve in the course of the project. Any inference about an individual's position regarding findings or recommendations in the final report is therefore also premature.

COMMUNICATION

At any time throughout the study, you may share your comments with the committee in writing. Send your comments and any supporting documentation to VAopioids@nas.edu.

To receive notification about future committee events and the report release, sign up for the listsery here.

STATEMENT OF TASK

An ad hoc committee of the National Academies of Sciences, Engineering, and Medicine will evaluate the effects of opioid and benzodiazepine use on all-cause mortality of U.S. veterans, including suicide, regardless of whether information relating to such deaths has been reported to the U.S. Centers for Disease Control and Prevention. Specifically, the committee will quantify the effects of opioid and benzodiazepine prescribing on the risk of death among veterans who received care from the Department of Veterans Affairs (VA) between 2007 and 2019. In their analysis, the committee will focus on

- (a) the effect of opioid prescribing for pain, relative to alternative non-opioid pain treatments, (b) the effects of higher doses relative to lower doses of opioids,
- (c) the effect of co-prescribing a benzodiazepine among patients already receiving opioids, relative to alternative treatments for anxiety and other indications for benzodiazepines, and
- (d) the effect of initiating opioids among patients already taking benzodiazepines.



SPEAKER BIOS

David Atkins, MD, MPH

Director, VA Health Services Research and Development Service

Dr. David Atkins is Director of VA's Health Services Research and Development (HSRD) Service, a position he began in 2013. During a 25-year career in government research agencies, his interests have focused on the intersection between research evidence, clinical and public policy, and health system improvement. He has written widely about standards of evidence and the role of evidence in guidelines, performance measures, policy and system change. In this current role at HSR&D, he oversees a more than \$120 million intramural health services research program, with more than 600 funded investigators and 245 ongoing research projects aimed at improving the health and care of Veterans. Dr. Atkins joined VA in 2008, serving until 2012 as Director of VA/HSR&D's Quality Enhancement Research Initiative (QUERI), which focuses on implementation of evidence-based innovations to improve healthcare for Veterans. For much of 2016, he served as VHA's Acting Chief Research and Development Officer, overseeing all four research services in the Office of Research and Development (ORD).

Before joining VA, Dr. Atkins spent more than a decade at the Agency for Healthcare Research and Quality (AHRQ), including serving as Chief Medical Officer at the Center for Outcomes and Evidence, where he oversaw all scientific aspects of the Center's research and programs. In this role, he also provided oversight for 13 AHRQ-funded Evidence-based Practice Centers. Before AHRQ, Dr. Atkins was a Senior Advisor for the U.S. Preventive Services Task Force, co-directing a national task force on clinical prevention convened by the U.S. Assistant Secretary for Health. Prior to joining AHRQ, he split his time between conducting epidemiologic research on cardiovascular disease prevention and providing primary care in the ambulatory setting at Harborview Hospital. Dr. Atkins received his M.D. from Yale University, is Board certified in Internal Medicine, and has a Master of Public Health in Epidemiology from the University of Washington, where he completed a NRSA Fellowship in Primary Medicine.

Jodie Trafton, Ph.D

Director, Program Evaluation and Resource Center VHA Office of Mental Health and Suicide Prevention

Dr. Jodie Trafton directs the Program Evaluation and Resource Center for the VHA Office of Mental Health and Suicide Prevention. She has extensive expertise in implementation and formative evaluation of mental health, substance use disorder, and pain management innovations in health care systems, as well as informatics/decision support, program evaluation, and performance measurement using heath care data.

Friedhelm Sandbrink, MD

Executive Director for Pain Management, Opioid Safety and Prescription Drug Monitoring Programs (PMOP), Specialty Care Program Office, Veterans Health Administration

Dr. Friedhelm Sandbrink is the Executive Director for the National Pain Management, Opioid Safety and Prescription Drug Monitoring Program in the Veterans Health Administration. He joined the Department of Veterans Affairs in 2001, and since then has been leading the comprehensive interdisciplinary Pain Management Program at the Washington DC VA Medical Center. He became the National Director for Pain Management in 2018. He is board certified in Neurology, Pain Medicine, and Clinical Neurophysiology.



He is Clinical Associate Professor in Neurology at the Uniformed Services University in Bethesda, MD and Assistant Clinical Professor of Neurology at George Washington University in Washington DC. Recent activities include VA/DoD Clinical Practice Guidelines for Opioid Therapy and for Low Back Pain. He was a member of the Pain Management Best Practices Task Force by the Department of Health and Human Services. He participates in the National Academies of Sciences, Engineering and Medicine (NASEM) Opioid Collaborative. He is co-chair of the VA/DoD Pain Management Work Group under the Health Executive Committee.

Emily Blair Rubright

Emily serves as Health Policy Advisor on the U.S. Senate Committee on Veterans Affairs—Republican staff. In this role she leads mental health, suicide prevention, research & development, rural health, and telehealth/virtual care policy for Ranking Member Jerry Moran. Previously, Emily served on the Committee as a Professional Staff Member where she was instrumental in the drafting and passage of the Commander John Scott Hannon Veterans Mental Health Care Improvement Act. Before her time in the Senate, Emily led government affairs for the National Alliance on Mental Illness in the military and veterans policy areas. Emily began her career in Washington on Capitol Hill in the U.S. House of Representatives covering veterans' issues, health care, and foreign policy—with a specialization in veterans mental health issues. She holds a BA in Political Science from Illinois College. Emily resides in Arlington, Virginia with her husband Steve and their newborn son Thayer.



PREVENTING DISCRIMINATION, HARASSMENT, AND BULLYING: POLICY FOR PARTICIPANTS IN NASEM ACTIVITIES

The National Academies of Sciences, Engineering, and Medicine (NASEM) are committed to the principles of diversity, inclusion, integrity, civility, and respect in all of our activities. We look to you to be a partner in this commitment by helping us to maintain a professional and cordial environment. **All forms of discrimination, harassment, and bullying are prohibited in any NASEM activity.** This policy applies to all participants in all settings and locations in which NASEM work and activities are conducted, including committee meetings, workshops, conferences, and other work and social functions where employees, volunteers, sponsors, vendors, or guests are present.

Discrimination is prejudicial treatment of individuals or groups of people based on their race, ethnicity, color, national origin, sex, sexual orientation, gender identity, age, religion, disability, veteran status, or any other characteristic protected by applicable laws.

Sexual harassment is unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature that creates an intimidating, hostile, or offensive environment.

Other types of harassment include any verbal or physical conduct directed at individuals or groups of people because of their race, ethnicity, color, national origin, sex, sexual orientation, gender identity, age, religion, disability, veteran status, or any other characteristic protected by applicable laws, that creates an intimidating, hostile, or offensive environment.

Bullying is unwelcome, aggressive behavior involving the use of influence, threat, intimidation, or coercion to dominate others in the professional environment.

REPORTING AND RESOLUTION

Any violation of this policy should be reported. If you experience or witness discrimination, harassment, or bullying, you are encouraged to make your unease or disapproval known to the individual at the time the incident occurs, if you are comfortable doing so. You are also urged to report any incident by:

- Filing a complaint with the Office of Human Resources at 202-334-3400 or hrservicecenter@nas.edu, or
- Reporting the incident to an employee involved in the activity in which the member or volunteer is participating, who will then file a complaint with the Office of Human Resources.

Complaints should be filed as soon as possible after an incident. To ensure the prompt and thorough investigation of the complaint, the complainant should provide as much information as is possible, such as names, dates, locations, and steps taken. The Office of Human Resources will investigate the alleged violation in consultation with the Office of the General Counsel.

If an investigation results in a finding that an individual has committed a violation, NASEM will take the actions necessary to protect those involved in its activities from any future discrimination, harassment, or bullying, including in appropriate circumstances the removal of an individual from current NASEM activities and a ban on participation in future activities.

CONFIDENTIALITY

Information contained in a complaint is kept confidential, and information is revealed only on a need-to-know basis. NASEM will not retaliate or tolerate retaliation against anyone who makes a good faith report of discrimination, harassment, or bullying.

Updated December 2, 2021