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Did you Know?

The RADARS System consists of six signal detection systems, each of which provides unique perspectives on prescription drug abuse, misuse and diversion.

A seventh signal detection system, the College Survey, is being piloted and will capture data on prescription drug abuse, misuse and diversion by college students across the nation.

RADARS System Hosts Second Annual Scientific Meeting

The Second Annual RADARS System Scientific Meeting: *From Signals to Interventions* took place on May 1, 2008, in Bethesda, Maryland, and marks the sixth anniversary of the RADARS System. Eighty attendees, including researchers and representatives from the pharmaceutical industry and regulatory agencies, participated in the meeting.

"This meeting was an opportunity to stimulate discussions on what an intervention entails and what are realistic expectations for prescription drug abuse interventions," said Richard C. Dart M.D., Ph.D., Executive Director of the RADARS System. "Guest speakers presented various interventions and associated outcomes documenting their successes and challenges. The interventions presented could serve as examples of how pharmaceutical companies can develop risk management plans to curb prescription drug abuse in the nation."

Dr. Dart provided an overview of 2007 RADARS System data and provided an introduction into key elements of risk management plans and how inter-

ventions play a key role in those plans. Dr. Dart also provided an overview of how the RADARS System captures prescription drug abuse, misuse and diversion data at various stages of dependence (opportunity, use, abuse, dependence) demonstrating that RADARS System data can identify abuse, misuse and diversion trends in populations within each of these different stages.

According to 2007 RADARS System data, 94 percent of three-digit ZIP codes in the US reported into the RADARS System, and of these, 97 percent reported at least one case of prescription abuse, misuse or diversion. These results remain consistent with findings from previous years by demonstrating that prescription drug abuse continues to affect nearly all areas of the nation.

Experts in public health interventions and in prescription drug abuse and diversion served as speakers at the meeting.

A detailed summary of the meeting is available at www.radars.org.



Photos: Dr. Richard C. Dart (top) and Commander John Burke speak at the Second Annual RADARS System Scientific Meeting

The following describes the guest speakers and their presentation topics.

- Dr. Jennifer Sabel from the Washington State Department of Health presented *Prescription Opiate Deaths in Washington State and Potential Solutions*
- Patrizia Carrieri from the French National Institute from Health and Medical Research presented *The Importance of Measuring Drug Related Harms and Benefits of Treatment in Post-Marketing Surveillance: Lessons from Buprenorphine*
- Commander John Burke from the National Association of Drug Diversion Investigators presented *Law Enforcement and the Pharmaceutical Industry-Collaboration for Success*
- Dr. Michael Arthur of the University of Washington presented *Using Community Monitoring to Promote Healthy Development: The Communities that Care Prevention System*
- Dr. Curtis Wright of Star Pharmaceuticals presented *Getting to Intervention: Lessons Learned from Abusable Drugs for Pharmaceutical Risk Assessment, Management and Intervention*

Interview with RADARS System Scientific Advisory Board Member, Commander John Burke



Commander John Burke

Commander John Burke is president of the National Association of Drug Diversion Investigators and is owner and president of Pharmaceutical Diversion Education Inc., a company which provides education and consultations on a wide variety of prescription drug abuse issues. Burke has been a law enforcement officer for more than 40 years and has provided educational sessions and lectures across the United States to law enforcement and health professionals on the topic of prescription drug abuse. He has published numerous articles on the topic, and has written a monthly column for the past five years in *Pharmacy Times* magazine on pharmaceutical diversion.

In addition to the activities listed above, Burke also commands the Greater Warren County Drug Task Force and Southwest Ohio High Intensity Drug Trafficking Area (HIDTA) Initiative in Lebanon, Ohio. In May, his drug task force teamed up with Purdue Pharma and completed the largest undercover purchase of OxyContin® ever in the United States, while effectively dismantling a multi-state pharmaceutical diversion criminal enterprise.

Q. Please tell us about your current work.

I currently command a large drug task force (15 members) in southwest Ohio that targets mid to upper level drug traffickers of both licit and illicit drugs. In addition, the task force is designated a High Intensity Drug Trafficking Area (HIDTA) which allows local, state, and federal law enforcement to work together in one task force and jointly pursue high-level offenders.

Q. At the RADARS System Annual Scientific Meeting, you presented *Law Enforcement and the Pharmaceutical Industry-Collaboration for Success*, a presentation on how pharmaceutical companies can collaborate with law enforcement agencies to curb prescription drug diversion. Can you describe the importance of these collaborations?

I learned a long time ago that in order to do the best job possible in law enforcement, it is essential that you utilize all of your available resources. Historically in law enforcement this has meant reaching out to other criminal and regulatory enforcement agencies and the general public, in order to do the best job possible.

However, what has been overlooked is our great opportunity to collaborate with industry, and specifically in my job, with the pharmaceutical industry. Although some of the collaborative investigative techniques cannot be discussed publicly, the pharmaceutical industry provides assistance in identifying counterfeit medications, funding of specific investigations, grant opportunities through the National Association of Drug Diversion Investigators (NADDI), and spon-

sorship of valuable training opportunities that include conferences and printed materials to assist uniform officers and detectives in the field.

We have only touched the surface on what can be done with the collaboration between law enforcement and the pharmaceutical industry. NADDI will soon be reaching out to the industry in hopes of an initial formal meeting where both entities can showcase their resources and articulate their goals in hopes of achieving the ultimate goal- reducing pharmaceutical diversion.

Q. Recently, your task force completed a major undercover investigation which involved the support of the pharmaceutical company. Can you comment on this success and how this collaboration worked?

Yes, we accomplished the largest undercover purchase of OxyContin ever in the United States. We were able to ultimately purchase 3,000 tablets (80mg) for \$105,000, before arresting the suspects in Dearborn, Michigan. This operation had been providing thousands of OxyContin tablets to addicts and abusers in southwest Ohio and beyond.

Purdue Pharma L.P., in addition to identifying pills in a previous undercover purchase, provided us with funding to purchase 600 tablets of their drug and allowed the money to leave with the suspects without them being arrested. This opened the door for the much larger 3,000 pill deal that assisted us in obtaining subsequent search warrants and providing a potentially much more significant sentence for the violators. The level of success attained in this investigation

could not have happened without Purdue Pharma's exceptional assistance.

Q. In your opinion, why is it important to monitor and understand prescription drug diversion trends?

Monitoring drug diversion trends is essential to do the best possible job of identifying the most popular drugs of abuse, and where these "hot spots" exist in the United States. Knowing what drug/s are involved in the diversion problem, and where that problem exists, allows all of us to plot the best possible solution to the problem, which will not necessarily be the same with each drug and location.

My association with the RADARS System has been an invaluable learning tool for me in law enforcement. I have found it fascinating as to how quickly the RADARS System is able to detect the diversion of particular drugs. I think credit is due to the multiple signal detection systems engrained in the RADARS System and their diversity that gives us this rapid and accurate account of prescription drug abuse.

Spotlight: National Association of Drug Diversion Investigators

The National Association of Drug Diversion Investigators, Inc. (NADDI) was established in 1989 to improve the ability of its members to investigate and prosecute pharmaceutical drug diversion. NADDI members include professionals in the law enforcement, government and pharmaceutical arenas.

NADDI provides education and training sessions on drug diversion, investigation, prosecution and prevention and shares information with a wide variety of organizations interested in current trends of pharmaceutical drug diversion. NADDI also organizes an annual meeting where participants are encouraged to review current trends and work to develop measures to combat prescription drug abuse in the United States.

NADDI provides grant funding for law enforcement agencies in the nation who wish to add one full-time officer devoted to issues involving prescription drug abuse to their force. For more information on this grant opportunity and for more information on NADDI please visit www.naddi.org.

RADARS System Launches its Sixth Signal Detection System: Survey of Key Informants' Patients

The RADARS System has successfully launched the Survey of Key Informants' Patients Signal Detection System. The sixth RADARS System signal detection system surveys patients recruited by key informants and asks patients to complete an anonymous questionnaire which inquires about the patient's drug use in the past month, lifetime drug

abuse, the age when drug use first occurred, and the primary source of the abused drug(s).

"This is an exciting new development. This new signal detection system enables the RADARS System to capture data on patients seeking treatment outside of opioid treatment programs and will provide a bet-

ter look at prescription drug abuse from the patient's perspective," said Richard C. Dart, M.D., Ph.D., RADARS System Executive Director.

The RADARS System has already analyzed first quarter 2008 data from this signal detection system.

Regulatory News



The Substance Abuse and Mental Health Services Administration (SAMHSA) has revealed that in 2009 a comprehensive needs assessment and evaluation of substance abuse data surveillance systems will be done to improve data collection, reduce costs and eliminate duplicative systems.

The following data collection systems will be evaluated in 2009:

- National Survey on Drug Use and Health (NSDUH),
- Drug Abuse Warning Network (DAWN),
- National Survey of Substance Abuse Treatment Services (N-SATS), and
- The Treatment Episode Data Set (TEDS)

Source: SAMHSA News, March/April 2008

Q&A

Q. Can RADARS System data be used as a part of a risk management plan?

A. Yes, the RADARS System tracks prescription drug abuse, misuse and diversion trends over time and uses two denominators to calculate rates. The use of two rates offers two views of prescription drug abuse, misuse and diversion: a population based rate and a rate based on drug availability within a community.

In addition, the RADARS System identifies 3-digit ZIP code signal sites which are locations with excessive prescription drug abuse, misuse, and diversion.

These data can be used in reports to the Food and Drug Administration to fulfill risk management obligations.

Recent RADARS System Publications & Presentations

- Campagna E, Bailey JE, Dart RC. Detection of Prescription Opioid Abuse/ Diversion Using RADARS System Data. The College on Problems of Drug Dependence Conference. San Juan, Puerto Rico. June, 2008.
- Kirtland ME, Heltshe SL, Bailey JE, Dart RC. Suicides and Gender: Characterization using RADARS System Poison Center Data. American Psychiatric Association Conference. Washington, DC. May 2008.
- Montoya AM, Heltshe SL, Dart RC. Spatial Analysis of RADARS System Data to Identify Geographic Hot Spots of Prescription Opioid Abuse. The College on Problems of Drug Dependence Conference. San Juan, Puerto Rico. June, 2008.
- Spaeth AL, Bailey JE, Dart RC. Characterization of Buprenorphine Abuse Using RADARS System Poison Center Data. The College on Problems of Drug Dependence Conference. Poster and Oral Presentation. June, 2008.
- Spiller HA, Lorenz D, Bailey JE, Dart RC. Epidemiological Trends in Prescription Drug Misuse and Abuse. The College on Problems of Drug Dependence Conference. San Juan, Puerto Rico. June, 2008.
- Zosel AE, Campagna E, Bailey JE, Dart RC. Demographic Variables Associated with Prescription Opioid Abuse and Diversion Detected by the RADARS System. The College on Problems of Drug Dependence Conference. San Juan, Puerto Rico. June, 2008.

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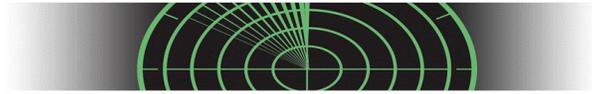
www.radars.org

Upcoming Meetings of Interest

- The Drug Information Association will host its 44th Annual Meeting June 22-26 in Boston, MA. RADARS System Executive Director, Richard Dart will participate in a session titled, *Risk Management and Pharmacovigilance for Opioids*.
- The American Academy of Pain Management will host its Annual Meeting September 8-11 in Nashville, TN.

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S Y S T E M



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Researched Abuse, Diversion, and Addiction-Related Surveillance (RADARS[®]) System

Researched Abuse, Diversion, and Addiction-Related Surveillance (RADARS[®]) System

RADARS System Mission Statement

The RADARS System provides timely and geographically-specific data to the pharmaceutical industry, regulatory agencies, policymakers and medical/public health officials to aid in understanding trends in the abuse, misuse, and diversion of prescription drugs in the United States.

Rocky Mountain Poison and Drug Center and Denver Health

The RADARS System is a governmental nonprofit operation of the Rocky Mountain Poison and Drug Center (RMPDC), an agency of Denver Health and Hospital Authority (DHHA). The RMPDC has been in operation for 50 years, making it one of the oldest poison control centers in the nation. DHHA is the safety net hospital for the City and County of Denver. DHHA is the Rocky Mountain region's academic Level I trauma center and includes Denver Public Health, Denver's 911 emergency medical response system, nine family health centers, 12 school-based clinics, NurseLine, correctional care, Denver CARES, the Denver Health Medical Plan, and the Rocky Mountain Center for Medical Response to Terrorism, Mass Casualties and Epidemics.

