



American Society of Addiction Medicine

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April 17, 2015

The Honorable Mitch McConnell
United States Senate
317 Russell Senate Office Building
Washington, DC 20510

The Honorable Robert Casey
United States Senate
393 Russell Senate Office Building
Washington, DC 20510

Dear Leader McConnell and Senator Casey:

On behalf of the American Society of Addiction Medicine (ASAM), a professional society representing more than 3,200 physicians and associated professionals dedicated to increasing access and improving the quality of addiction treatment, I am pleased to write in support of S. 799, the Protecting Our Infants Act of 2015.

ASAM is deeply committed to the prevention of alcohol and other drug-related harm and to the health and well-being of mothers and their children.¹ Preventing and treating opioid use disorders among pregnant women and women of childbearing age is paramount to ensuring the health of mothers and critical to minimizing or preventing neonatal abstinence syndrome (NAS), in which newborns experience withdrawal symptoms shortly after birth due to drug exposure in utero. Efforts to support improved prevention and early identification of those at risk for these serious disorders, and provide comprehensive treatment for those suffering from them, are timely and needed. Research has shown that the rate of maternal opiate use during pregnancy increased from 1.19 to 5.63 per 1,000 hospital births between 2000 and 2009. At the same time, the incidence of NAS among newborns increased from 1.20 to 3.39 per 1,000 hospital births per year.²

For decades, the federal government has recommended the use of medication as part of comprehensive treatment for opioid use disorder among pregnant women to decrease maternal and child morbidity and mortality, and recent research has confirmed that both methadone and buprenorphine are important parts of a comprehensive treatment approach for opioid-dependent pregnant women.^{3,4} While the importance of breastfeeding while the mother is on medication is not yet well understood, the limited research available suggests that both methadone and buprenorphine are compatible with breastfeeding.⁵

The Protecting our Infants Act would enhance our understanding of opioid use and the treatment of opioid use disorders among pregnant women and women of childbearing age, support efforts to collect and disseminate best practices for treating prenatal opioid addiction and NAS, identify gaps in research related to NAS and the long-term effects of in-utero opioid exposure, and support improved data collection and surveillance of NAS.

ASAM is pleased to endorse this important piece of legislation, which aligns with ASAM's forthcoming National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use and will improve our ability to prevent and treat opioid use disorders among pregnant women and NAS. In particular, we applaud efforts to educate providers on evidence-based treatments, and we especially applaud the understanding that pregnant women with addiction need to be medically treated rather than criminalized for their disease.

We thank you for your leadership on this important issue, and we look forward to the opportunity to work with you, the Congress, HHS and other stakeholders to improve prevention and treatment services for women and infants affected by opioid use disorders. If we may be of further assistance, please contact ASAM's Director of Advocacy and Government Relations, Susan Awad at 301-547-4103 or sawad@asam.org.

Sincerely,



Stuart Gitlow, MD, MBA, MPH, FAPA
President, American Society of Addiction Medicine

¹ ASAM Public Policy Statement on Women, Alcohol and Other Drugs, and Pregnancy, 2011. <http://www.asam.org/advocacy/find-a-policy-statement/view-policy-statement/public-policy-statements/2011/12/15/women-alcohol-and-other-drugs-and-pregnancy>

² Patrick SW, Schumacher RE, Benneyworth BD, et al. Neonatal Abstinence Syndrome and Associated Health Care Expenditures: United States 2000-2009. *JAMA*. 2012;307(18):1934-1940. <http://jama.jamanetwork.com/article.aspx?articleid=1151530>

³ Center for Substance Abuse Treatment. *Medication-Assisted Treatment for Opioid Addiction in Opioid Treatment Programs*. Treatment Improvement Protocol (TIP) Series 43. HHS Publication No. (SMA) 12-4214. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2005. <http://www.ncbi.nlm.nih.gov/books/NBK64164/pdf/TOC.pdf>

⁴ Jones HE, Heil SH, Baewert A, et al. Buprenorphine treatment of opioid-dependent pregnant women: a comprehensive review. *Addiction*. 2012 Nov;107 Suppl 1:5-27. <http://www.ncbi.nlm.nih.gov/pubmed/23106923>

⁵ Ibid.