Ask Dr. Arwady

September 20, 2022

Guests:

Dr. Wilnise Jasmin, Medical Director, CDPH
Dr. Nicole Gastala, Medical Director, Substance Use Prevention and Recovery Division, IDHS
Monkeypox Update

September 20, 2022
2022 MPV global outbreak: **62,406** Total Confirmed Cases identified in **104** countries

Source: CDC, Data as of 9/19/2022
In the U.S., **23,893** Total Confirmed MPV Cases identified

As of 9/19
- Illinois: **1,220**
- Chicago: **991**

Source: CDC
Chicago Data: Chicago.gov/MPV
U.S. Monkeypox Case Trends Reported to CDC – 9/19/2022

Daily Monkeypox Cases Reported* and 7 Day Daily Average

Source: CDC
MPV is across Chicago: Residents of 69 of Chicago’s 77 community areas have been diagnosed with MPV to date

As of 9/19/2022
MPV cases diagnosed in Chicago residents (updates M-F)

<table>
<thead>
<tr>
<th>Cumulative Cases</th>
<th>Cumulative Hospitalizations</th>
<th>Cumulative Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>991</td>
<td>63</td>
<td>0</td>
</tr>
</tbody>
</table>

Good news: Ongoing decrease in new cases.
However, now seeing higher proportion of cases in Black Chicagoans.

Chicago.gov/monkeypox
Data as of 9/19/2022

*Data represented in the gray-colored bar(s) are not yet complete.*
Increasing proportion of Black, non-Latinx Chicagoans among local MPV cases
Demographics of Chicagoans diagnosed with MPV

- **Age Group**
  - 0-17: 0 (0%)  
  - 18-24: 67 (7%)  
  - 25-34: 437 (44%)  
  - 35-44: 301 (30%)  
  - 45-54: 130 (13%)  
  - 55-64: 53 (5%)  
  - 65+: 3 (0%)  
  - Unknown: 0 (0%)

- **Race/Ethnicity**
  - Asian, non-Latinx: 29 (3%)  
  - Black, non-Latinx: 262 (26%)  
  - Latinx: 301 (30%)  
  - White, non-Latinx: 372 (38%)  
  - Other, non-Latinx: 11 (1%)  
  - Unknown: 16 (2%)

- **Sex**
  - Male: 978 (99%)  
  - Female: 11 (1%)  
  - Other: 0 (0%)  
  - Unknown: 2 (0%)

- **Gender**
  - Man: 899 (91%)  
  - Woman: 6 (1%)  
  - Transgender Man: 4 (0%)  
  - Transgender Woman: 6 (1%)  
  - Other: 7 (1%)  
  - Unknown: 69 (7%)

- **Sexual Orientation**
  - Gay/Lesbian: 649 (65%)  
  - Bisexual: 58 (6%)  
  - Straight/Heterosexual: 38 (4%)  
  - Other: 12 (1%)  
  - Unknown: 234 (24%)

94% of Chicagoans reporting their sexual orientation have been gay or bisexual.

- **Sex** refers to sex assigned at birth
- **Gender and sexual orientation** are self-reported at the time of care or during interview with CDPH staff
- Some information about cases may be classified as unknown because the case did not provide it or because the case has not yet been reached for interview.
Continued focus on increasing testing and vaccination among Latinx and Black Chicagoans at increased risk:

30% of MPV cases in Latinx Chicagoans, 18% of MPV vaccines to Latinx Chicagoans.
27% of MPV cases in Black Chicagoans, 13% of MPV vaccines to Black Chicagoans.

Data reported as of 9/19/2022. Demographic information is captured differently between cases and those vaccinated in I-CARE. Interpret comparisons with caution.
Chicago MPV (Monkeypox) Vaccination Summary

Cumulative Doses: 35,260
Cumulative First Doses: 25,885
Cumulative Second Doses: 9,375

Doses of MPV (Monkeypox) Vaccine Administered to Chicagoans, by Week

Data last updated: 9/19/2022. Counts include doses administered through 9/17/2022.
Data are updated on Monday at 2:00 p.m., except for City holidays when data will be updated on Tuesday. All data are provisional and subject to change.
Data presented do not include doses of vaccine given in Chicago to non-Chicago residents.
# Chicago MPV (Monkeypox) Vaccination Details

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Received a 1&lt;sup&gt;st&lt;/sup&gt; Dose</th>
<th>Received a 2&lt;sup&gt;nd&lt;/sup&gt; Dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-17 yrs</td>
<td>2 (0%)</td>
<td>(0%)</td>
</tr>
<tr>
<td>18-24 yrs</td>
<td>1,893 (7%)</td>
<td>406 (4%)</td>
</tr>
<tr>
<td>25-34 yrs</td>
<td>10,095 (39%)</td>
<td>3,576 (38%)</td>
</tr>
<tr>
<td>35-44 yrs</td>
<td>6,574 (25%)</td>
<td>2,657 (28%)</td>
</tr>
<tr>
<td>45-54 yrs</td>
<td>3,610 (14%)</td>
<td>1,426 (15%)</td>
</tr>
<tr>
<td>55-64 yrs</td>
<td>2,785 (11%)</td>
<td>1,037 (11%)</td>
</tr>
<tr>
<td>65+ yrs</td>
<td>899 (3%)</td>
<td>270 (3%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>27 (0%)</td>
<td>3 (0%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Count (%)</th>
<th>Count (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian, non-Latinx</td>
<td>1,509 (6%)</td>
<td>538 (6%)</td>
</tr>
<tr>
<td>Black, non-Latinx</td>
<td>3,393 (13%)</td>
<td>1,119 (12%)</td>
</tr>
<tr>
<td>Latinx</td>
<td>4,563 (18%)</td>
<td>1,443 (15%)</td>
</tr>
<tr>
<td>White, non-Latinx</td>
<td>13,236 (51%)</td>
<td>5,382 (57%)</td>
</tr>
<tr>
<td>Other, non-Latinx</td>
<td>1,710 (7%)</td>
<td>512 (5%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>1,474 (6%)</td>
<td>381 (4%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex</th>
<th>Count (%)</th>
<th>Count (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>23,727 (92%)</td>
<td>8,936 (95%)</td>
</tr>
<tr>
<td>Female</td>
<td>1,483 (6%)</td>
<td>230 (2%)</td>
</tr>
<tr>
<td>Other</td>
<td>55 (0%)</td>
<td>12 (0%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>620 (2%)</td>
<td>197 (2%)</td>
</tr>
</tbody>
</table>

| Total       | 25,885 (100%)| 9,375 (100%)|
Excellent match on race/ethnicity of MPV cases and Chicagoans who received TREATMENT (TPOXX) for MPV

Data as of 9/19/22
Eligibility for the monkeypox vaccine has expanded in Chicago to:

- ALL sexually active Gay, Bi and other men who have sex with men
- ALL sexually active transgender persons

Second dose registration is open!

Plenty of appointments available!
ANNOUNCEMENT!

MPV VACCINATIONS AVAILABLE 6 DAYS A WEEK AT THREE CDPH STI SPECIALTY CLINICS BY APPOINTMENT ONLY!

Lakeview • 2849 N Clark St, 1st Floor
Austin • 4909 W Division St, Suite 411
Roseland • 200 E 115th St, Floor 1.5
Register at: getvaxchi.chicago.gov

ELIGIBILITY REQUIREMENTS AT: CHICAGO.GOV/MPV
HAVE QUESTIONS ABOUT MONKEYPOX?

visit
CHICAGO.GOV/MONKEYPOX
or call
312-746-4835
HIV/STI Resource Hub: 844-482-4040
COVID-19 Update

September 20, 2022
Average daily COVID-19 cases per 100,000 population

608.9 Million Cases
6.4 Million Deaths
12.5 Billion Vaccine Doses Administered
5.3 Billion Vaccinated (69.7% of population)

Presented by the New York Times 9/13/2022; Sources: Local governments; The Center for Systems Science and Engineering at Johns Hopkins University; National Health Commission of the People’s Republic of China; World Health Organization.
Average daily COVID-19 cases per 100,000 population

95.1 Million Cumulative Cases
1.04 Million Cumulative Deaths

Vaccinations

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Fully Vaccinated</th>
<th>With a Booster</th>
</tr>
</thead>
<tbody>
<tr>
<td>All ages</td>
<td>68%</td>
<td>33%</td>
</tr>
<tr>
<td>65 and up</td>
<td>92%</td>
<td>65%</td>
</tr>
</tbody>
</table>

National currently:
21 diagnosed daily cases per 100,000 people

Illinois currently:
21 diagnosed daily cases per 100,000 people

Chicago currently:
15 diagnosed daily cases per 100,000 people

Presented by the New York Times 9/13/2022; Sources: Local governments; The Center for Systems Science and Engineering at Johns Hopkins University
COVID: In last week’s CDC update, **49% of U.S. Counties** reported High or Medium COVID Community Level (57% one week ago).

*CDC updates this map on Thursday evenings.*

https://covid.cdc.gov/covid-data-tracker/#county-view?list_select_state=all_states&list_select_county=all_counties&data-type=
Our local risk based on CDC COVID-19 Community Levels is:  

Medium

<table>
<thead>
<tr>
<th></th>
<th>New cases per 100,000 population (last 7 days) [Goal is &lt;200]</th>
<th>New admissions per 100,000 population (last 7 days) [Goal is &lt;10]</th>
<th>Percent of staffed inpatient beds occupied by COVID-19 patients (last 7 days) [Goal is &lt;10%]</th>
</tr>
</thead>
<tbody>
<tr>
<td>City of Chicago</td>
<td>106</td>
<td>8.3</td>
<td>4.2%</td>
</tr>
<tr>
<td>Cook County (including City of Chicago)</td>
<td>137</td>
<td>10.7</td>
<td>4.3%</td>
</tr>
</tbody>
</table>

Chicago metrics are calculated based on Chicago-level data.
Cook County metrics are calculated by the CDC and posted on the CDC Community Levels website.
Data current as of 9/16/2022.

Variant Surveillance, Midwest Region
Continued evolution of more infectious Omicron subvariants; increased BA4/5

Good News:

It’s STILL ALL OMICRON
(and now nearly all BA4/5)

- BF.7 (2.0%)
- BA.2.75 (1.6%)
- BA.4 (1.7%)
- BA.4.6 (7.9%)
- BA.5 (86.8%)

Collection date, week ending

https://covid.cdc.gov/covid-data-tracker/#circulatingVariants
SARS-CoV-2 Variant Surveillance, United States

United States: 9/11/2022 – 9/17/2022 NOWCAST

BF.7 (1.7%)
BA.2.75 (1.3%)
BA.4 (1.8%)
BA.4.6 (10.3%)
BA.5 (84.8%)

https://covid.cdc.gov/covid-data-tracker/#circulatingVariants
Chicago: COVID-19 Vaccine Coverage
12.8% (roughly 20,800) of Chicagoans under 5 have received one dose of COVID vaccine. Compares to about 5% nationally.

UPDATED COVID-19 VACCINES

THESE NEW “BIVALENT BOOSTERS” ARE TARGETED SPECIFICALLY TOWARD THE OMICRON SUB VARIANTS.

Chicago.gov/boost
Over 32,000 doses of the updated boosters have been administered to Chicagoans in the first days of the roll out

Vaccine endorsed for use the CDC Director on 9/1, vaccination generally began after Labor Day (9/5)

Data reported to I-CARE as of 9/14/2022.
1.71 million due* for an updated booster

2.32 million aged 12+ living in Chicago

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Count</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-17 yrs</td>
<td>121,259</td>
<td>7%</td>
</tr>
<tr>
<td>18-29 yrs</td>
<td>352,420</td>
<td>20%</td>
</tr>
<tr>
<td>30-39 yrs</td>
<td>350,909</td>
<td>20%</td>
</tr>
<tr>
<td>40-49 yrs</td>
<td>271,804</td>
<td>16%</td>
</tr>
<tr>
<td>50-59 yrs</td>
<td>243,276</td>
<td>14%</td>
</tr>
<tr>
<td>60-69 yrs</td>
<td>202,283</td>
<td>12%</td>
</tr>
<tr>
<td>70-79 yrs</td>
<td>117,140</td>
<td>7%</td>
</tr>
<tr>
<td>80+ yrs</td>
<td>60,602</td>
<td>4%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Count</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latinx</td>
<td>468,515</td>
<td>27%</td>
</tr>
<tr>
<td>Black, non-Latinx</td>
<td>394,168</td>
<td>23%</td>
</tr>
<tr>
<td>White, non-Latinx</td>
<td>596,077</td>
<td>35%</td>
</tr>
<tr>
<td>Asian, non-Latinx</td>
<td>131,886</td>
<td>8%</td>
</tr>
<tr>
<td>AIAN, non-Latinx</td>
<td>7,363</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>NHPI, non-Latinx</td>
<td>3,372</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Other, non-Latinx</td>
<td>64,681</td>
<td>4%</td>
</tr>
<tr>
<td>Unknown</td>
<td>53,631</td>
<td>3%</td>
</tr>
</tbody>
</table>

*2 months since completion of a primary series or monovalent booster dose, whichever is latest

AIAN = American Indian Alaskan Native
NHPI = Native Hawaiian Pacific Islander
Demographics of Chicagoans who received an updated COVID-19 vaccine (N= 32,023)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Count</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-17 yrs</td>
<td>766</td>
<td>2%</td>
</tr>
<tr>
<td>18-29 yrs</td>
<td>3,011</td>
<td>9%</td>
</tr>
<tr>
<td>30-39 yrs</td>
<td>7,224</td>
<td>22%</td>
</tr>
<tr>
<td>40-49 yrs</td>
<td>5,542</td>
<td>17%</td>
</tr>
<tr>
<td>50-59 yrs</td>
<td>4,085</td>
<td>13%</td>
</tr>
<tr>
<td>60-69 yrs</td>
<td>5,302</td>
<td>16%</td>
</tr>
<tr>
<td>70-79 yrs</td>
<td>4,563</td>
<td>14%</td>
</tr>
<tr>
<td>80+ yrs</td>
<td>1,710</td>
<td>5%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race-ethnicity</th>
<th>Count</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Latinx</td>
<td>3,712</td>
<td>12%</td>
</tr>
<tr>
<td>Black, non-Latinx</td>
<td>3,896</td>
<td>12%</td>
</tr>
<tr>
<td>White, non-Latinx</td>
<td>20,966</td>
<td>65%</td>
</tr>
<tr>
<td>Asian, non-Latinx</td>
<td>2,528</td>
<td>8%</td>
</tr>
<tr>
<td>AIAN, non-Latinx</td>
<td>178</td>
<td>1%</td>
</tr>
<tr>
<td>NHPI, non-Latinx</td>
<td>66</td>
<td>0%</td>
</tr>
<tr>
<td>Other, non-Latinx</td>
<td>345</td>
<td>1%</td>
</tr>
<tr>
<td>Unknown</td>
<td>513</td>
<td>2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sex</th>
<th>Count</th>
<th>(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>17,228</td>
<td>54%</td>
</tr>
<tr>
<td>Male</td>
<td>14,961</td>
<td>46%</td>
</tr>
<tr>
<td>Unknown</td>
<td>15</td>
<td>0%</td>
</tr>
</tbody>
</table>

Data reported to I-CARE as of 9/14/2022.

AIAN = American Indian Alaskan Native
NHPI = Native Hawaiian Pacific Islander
THE COMBO YOU DON’T WANT
GET BOTH VACCINES.
CHI.GOV/FLU
Saturday, September 24 • 9am-2pm

Updated vaccine/bivalent boosters will be available!

Richard J. Daley College • 7500 S. Pulaski Rd.
Register at: rebrand.ly/DaleyCollege

Wilbur Wright College • 4300 N. Narragansett Ave.
Register at: rebrand.ly/WrightCollege

GET $50* for 1st, 2nd & booster doses!

*All Chicagoans 5 years and older are eligible to receive one $50 gift card for each 1st, 2nd, booster (ages 5-11), and bivalent booster doses. Incentives provided while supplies last. Patients must verify they have not received more than $100 in COVID-19 incentive to qualify. Gift cards will be delivered by mail, not at the time of the appointment.

Type of Vaccine: Flu, COVID-19 primary series from Pfizer and Moderna starting 6 months+, and Pfizer bivalent boosters from 12 years+

WALK-INS WELCOME!
Plenty of opportunities available

- **City Hall Clinics**
  - 10/13, 11/8, and 12/6

- **City Colleges of Chicago – Saturday Clinics**
  - 9/24: Richard J. Daley College and Wilbur Wright College
  - 10/1: Kennedy King College
  - 10/8: Arturo Velasquez Westside Technical Institute and Olive Harvey College
  - 10/15: Harry S. Truman College
  - 10/16: Malcolm X College
  - 10/22: Richard J. Daley College and Wilbur Wright College
  - 10/29: Kennedy King College

- **Additional sites partnering with alderman and organizations across the city including DFSS locations serving seniors and other congregate settings**

- **Chicago.gov/VaxCalendar for the most up to date details and additional events**
ANYONE AGE 6 MONTHS AND UP CAN GET A COVID-19 VACCINE OR BOOSTER AT HOME!

- Moderna (age 6 months through 5 years) and Pfizer (age 6 months and older) will be offered
- Pfizer booster doses for 5-11 year-olds and updated—Pfizer bivalent boosters for eligible Chicagoans age 12 and up are available
- Up to 10 people can get vaccinated at the same time.
- Appointment Hours:
  Saturday-Tuesday, 8:00 am to 6:30 pm

THROUGH SEPTEMBER 30, 2022
$50 GIFT CARDS WILL BE OFFERED FOR:
- Any Chicagoan age 5+ for booster doses—regardless of zip code
- Chicago residents of certain zip codes for each dose of primary vaccine administered

ELIGIBLE CHICAGO ZIP CODES:
60608, 60612, 60617, 60619, 60620, 60621, 60624, 60628, 60633, 60636
60637, 60644, 60649, 60651, 60653, 60707, 60827

TO SCHEDULE YOUR HOME VACCINATION, VISIT CHICAGO.GOV/ATHOME OR CALL 312-746-4835.
ATTN: Chicagoans!
Help us understand why some people recover differently from COVID-19.

Join a study and get paid to help us learn about Long COVID.
Who can join the study?

YOU CAN JOIN IF:
- You currently have COVID
- You tested positive for COVID in the last 30 days
- You’ve never had COVID

We need adults and children from all races, ethnicities, and backgrounds to join.

What will happen if I join?

YOU’LL GET PAID FOR YOUR TIME, AND WE MAY ASK YOU TO:
- Answer survey questions
- Have checkups and tests
- Take part for up to 4 years

The study will not give anyone treatment or medicine for COVID. If you join, you can still take treatments and medicines your doctor gives you.

Scan the QR code to find a study near you.

Learn more about RECOVER and Long COVID at RECOVERcovid.org

Illinois is one of 30 study centers nationwide that will develop best practices for people with difficulty recovering from COVID. Visit illinet.org to learn more about ILLInet RECOVER.

For Additional Questions:
Chicago Study Site: 855-461-8185 • Peoria Study Site: 309-233-0299 • Email: info@illinet.org
Need a vaccine or a booster? Have questions?

visit

CHI.GOV/COVIDVAX

or call

312-746-4835
More than 20 million Americans are recovering from substance use disorder.

Recovery Month celebrates the gains made by those in recovery from substance use and mental health, just as we celebrate improvements made by those who are managing other health conditions.
National Recovery Month

Recovery Month was first observed in 1989 and is a national observance held every September to promote and support new evidence-based treatment and recovery practices for substance use disorder.

Recovery is defined as a process of change where individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.
# Substance Use Disorder (SUD)

| What a substance use disorder **IS:** | • The recurrent use of alcohol and/or drugs that causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.  
• SUDs are common, chronic, and treatable with medication and behavioral therapies.  
• SUDs affect a person's brain, body, and behavior.  
• SUDs are diagnosed by medical professionals.  
• SUDs can often co-occur with a mental health condition.  
• SUDs can result from or be tied to an individual's attempt to cope with trauma. |
| --- | --- |
| What a substance use disorder **IS NOT:** | • A personal or moral failing  
• A character flaw  
• A choice |
## Language Matters

<table>
<thead>
<tr>
<th>Instead of...</th>
<th>Use...</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abuse</td>
<td>Use, misuse</td>
</tr>
<tr>
<td>Addict, junkie, abuser, user</td>
<td>Person with substance use disorder, Person in active use (‘person first language’)</td>
</tr>
<tr>
<td>Alcoholic</td>
<td>Person with alcohol use disorder</td>
</tr>
<tr>
<td>Drunk</td>
<td>Person who misuses alcohol/engages in unhealthy/hazardous alcohol use</td>
</tr>
<tr>
<td>Clean</td>
<td>New, sterile, (screen) positive/negative, person in recovery</td>
</tr>
<tr>
<td>Dirty</td>
<td>Used, (screen) positive/negative</td>
</tr>
<tr>
<td>Habit, drug habit, drug problem</td>
<td>Substance use disorder, substance use</td>
</tr>
<tr>
<td>Replacement or substitution therapy</td>
<td>Medication assisted recovery, treatment</td>
</tr>
<tr>
<td>Detox</td>
<td>Withdrawal management</td>
</tr>
<tr>
<td>Sober</td>
<td>In Recovery</td>
</tr>
</tbody>
</table>

People with lived experience may identify with language that public health find stigmatizing.
Medication Assisted Recovery (MAR)

Buprenorphine, methadone, or naltrexone to treat opioid use disorder, in some cases in combination with behavioral therapies like counseling or group therapy.

MAR is the standard of care for opioid use disorder, but an estimated 87% of people nationwide with an opioid use disorder do not receive MAR.
Evidence clearly indicates MAR is an effective treatment and harm reduction intervention

Compared to behavioral therapy alone, MAR:
1. Decreases illicit opioid use
2. Retains patients in treatment
3. Reduces mortality: *patients on buprenorphine have a 40-80% lowered risk of fatal overdose compared to those not receiving buprenorphine treatment*

**NOTE:** "detox" or supervised withdrawal is **NOT** an effective treatment and **INCREASES** the risk of overdose if no linkage to next level of care
Evidence clearly indicates MAR is an effective treatment and harm reduction intervention.

<table>
<thead>
<tr>
<th>Treatment type</th>
<th>Retention in treatment at 12 months with reduced illicit drug use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral therapy without medication</td>
<td>6%</td>
</tr>
<tr>
<td>XR Naltrexone**#</td>
<td>10–31%</td>
</tr>
<tr>
<td>Buprenorphine*</td>
<td>60–90%</td>
</tr>
<tr>
<td>Methadone*</td>
<td>74–80%</td>
</tr>
</tbody>
</table>

*Based on meta-analysis of research studies; rates of success lower in real-world settings.
#Most XR Naltrexone studies were only 3–6 months; 12-month registry study only had % discontinued due to meeting goals; numbers presented here are different than report referenced because they were updated based on Jarvis study.
Permission for Use by Dr. Elizabeth Salisbury-Afshar, Elitzer, 2017, Jarvis, Holtyn, et al., 2018
IS OPIOID USE CAUSING PROBLEMS FOR YOU?

Buprenorphine and methadone stop withdrawal symptoms and cravings, and effectively reduce illicit opioid use.

<table>
<thead>
<tr>
<th></th>
<th>BUPRENORPHINE</th>
<th>METHADONE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WHEN CAN I START?</strong></td>
<td>12-24 Hours after last opioid use</td>
<td>Immediately</td>
</tr>
<tr>
<td><strong>HOW DO I TAKE IT?</strong></td>
<td>Dissolve a film or pill in your mouth once/day. You can receive a prescription to start at home without going to a clinic first.</td>
<td>Take one dose/day at approved programs. Usually you have to go in person to receive the dose, but some take-home dose may be permitted.</td>
</tr>
<tr>
<td><strong>HOW DO I LONG TAKE IT?</strong></td>
<td>Most effective when used for 9+ months.</td>
<td>Most effective when used for at least 1 year.</td>
</tr>
<tr>
<td><strong>HOW DO I GET IT?</strong></td>
<td>CALL 833-234-6343 and ask for MAR NOW (medication assisted recovery now). Everyone in Illinois is eligible.</td>
<td>No. Through the MAR NOW program, anyone can access these medications with or without insurance. Just CALL 833-234-6343 to get started.</td>
</tr>
</tbody>
</table>

HELP STARTS HERE.
MAR restrictions have been waived under COVID to allow for low-barrier prescription

1. Buprenorphine may be prescribed via audio-only telemedicine
2. Initial in-person examination with provider before first buprenorphine prescription is waived
3. Buprenorphine providers may use non-HIPAA-compliant platforms to reach patients

These changes have allowed states and cities to implement "buprenorphine hotlines" or "telebuprenorphine clinics" where buprenorphine initiation is conducted over phone/video
MAR Medication-Assisted Recovery is a safe and effective treatment for opioid use disorder.

With the MAR NOW Program, MAR is available to anyone in Chicago, regardless of insurance status, income, or ability to pay.

Call 833-234-6343 and ask for MAR NOW to receive immediate treatment 7 days/week.

To request fentanyl test strips, email OSU.CDPH@cityofchicago.org
INTERNATIONAL OVERDOSE AWARENESS DAY 2022

LEARN WHAT YOU CAN DO TO END OVERDOSE:
CARRY NARCAN

Narcan is a safe and effective medication that reverses an opioid overdose.

You can find Narcan for free at 51 Chicago Public Libraries.

To request fentanyl test strips, email OSU.CDPH@CITYOFCHICAGO.ORG

#EndOverdose #IOAD2022
INTERNATIONAL OVERDOSE AWARENESS DAY 2022

LEARN WHAT YOU CAN DO TO END OVERDOSE:
STAY INFORMED

Can you recognize the signs of opioid overdose?
Signs: slow, shallow breathing, choking, limp body, pale/blue/cold skin, falling asleep or lack of consciousness, very small pupils

If you think someone is overdosing, call 911 and use naloxone if you have it

Overdose affects every community in Chicago.
Visit the Health Atlas to view overdose data: chicagoleanhealthatlas.org

#EndOverdose #iOAD2022
Fentanyl is increasingly found in substances like pills and cocaine. To be safer, use fentanyl test strips to test for fentanyl before using.

To access free fentanyl test strips, email: OSU.CDPH@CITYOFCHICAGO.ORG

#EndOverdose  #iOAD2022
Medication assisted recovery (MAR) involves the use of medications to treat opioid use disorder. MAR reduces the risk of overdose, reduces illicit drug use, and retains patients in treatment.

If you want help with opioid use, call 833-234-6343 7 days/week and ask for MAR NOW. This program will connect you immediately to a treatment provider, and help with transportation and insurance enrollment.

MAR NOW is available to all Chicagoans, regardless of insurance status or ability to pay.
LEARN WHAT YOU CAN DO TO END OVERDOSE:

REDUCE STIGMA

Stigma around opioid use and overdose can prevent people from accessing the help that they need.

Opioid use disorder is a medical condition, not a character flaw. Treatment is effective, and relapse is not failure.

Use destigmatizing language.

Avoid words like "abuse, abuser, addict, clean." Instead, use "use, person with an opioid use disorder, person in recovery."

Medications to treat opioid use are available to all Chicagoans, regardless of insurance status, income, or ability to pay. Call 833-234-6343 for immediate help.
### WARNING SIGNS OF SUICIDE

<table>
<thead>
<tr>
<th>Talking about wanting to die</th>
<th>Acting anxious, agitated or recklessly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Looking for a way to kill oneself</td>
<td>Displaying extreme mood swings</td>
</tr>
<tr>
<td>Increasing the use of alcohol or drugs</td>
<td>Talking about feeling hopeless or having no purpose</td>
</tr>
<tr>
<td>Talking about feeling trapped or unbearable pain</td>
<td>Showing rage or talking about seeking revenge</td>
</tr>
<tr>
<td>Withdrawing or feeling isolated</td>
<td>Talking about being a burden to others</td>
</tr>
<tr>
<td>Showing rage or talking about seeking revenge</td>
<td>Sleeping too little or too much</td>
</tr>
</tbody>
</table>
There is hope.

5 Action Steps for Helping Someone in Emotional Pain

**ASK**
“Are you thinking about killing yourself?”

**KEEP THEM SAFE**
Reduce access to lethal items or places.

**BE THERE**
Listen carefully and acknowledge their feelings.

**HELP THEM CONNECT**
Call or text the 988 Suicide & Crisis Lifeline number (988).

**STAY CONNECTED**
Follow up and stay in touch after a crisis.