In Support of Residency Training to Address the Opioid Overdose Epidemic

To the Editor:

In March 2019, the National Academies of Sciences, Engineering, and Medicine released a consensus committee report entitled *Medications for Opioid Use Disorder Save Lives*. The report found that “To stem the opioid crisis, it is critical for all FDA-approved options to be available for all people with opioid use disorder.” The 3 current approved medications (methadone, buprenorphine and naltrexone) are available in multiple formulations, including long-acting implants and injectables, and all except methadone are usually prescribed in a physician’s office. The report found that a major barrier to medication use is “the lack of appropriate education and training among health care providers.”

The Accreditation Council for Graduate Medical Education (ACGME) plays an essential role in educating and training physicians. Currently, none of the ACGME’s curriculum components require that physicians-in-training learn to treat opioid addiction. At present, fewer than 7% of American physicians have completed the necessary 8-hour DATA waiver training to allow them to prescribe buprenorphine for opioid use disorder, a medication associated with a 50% or greater reduction in the probability of overdose death. An ACGME requirement for such training in the over 11,000 programs they accredit would dramatically improve the nation’s capacity to address the opioid epidemic and begin to close enormous gaps in training with respect to addiction more generally.

In recent months, a group of medical students and faculty have asked the ACGME residency review committees to consider requiring training in addiction treatment for residents. None have agreed to date. A recent JAMA blog posting set out the case for ACGME leadership; the response has been a willingness to consider the question further. A bipartisan group of 31 members of the US Congress has also asked the ACGME to require that all physicians-in-training who care for patients with opioid use disorder learn to treat opioid addiction.

We ask that the ACGME act promptly and establish a requirement that all residents and fellows who care for patients who use opioids, as well as their core faculty, receive specific training on the treatment of opioid use disorder. This is a defining moment for American medicine. It is our obligation to provide physicians with sufficient training to effectively treat patients with opioid use disorder.

We are writing to urge health care professionals to sign on to this letter at [www.AddictionTrainingForResidents.org](http://www.AddictionTrainingForResidents.org).
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The views expressed are those of the authors and do not necessarily represent the views of their institutions.
Citations


