

March 2023 Newsletter

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NIDA and NIAAA Request For Information

The National Institute on Drug Abuse (NIDA) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) have jointly issued a “Request for Information (RFI): Inviting input on use of a term like “pre-addiction” for identifying and intervening in substance misuse and mild/early-stage substance use disorder.” Read more [here](#).

DEA Releases Proposed Rule on the Virtual Prescribing of Controlled Substances

On February 24, the Drug Enforcement Administration (DEA) released a [proposed rule](#) on permanent telehealth flexibilities for the prescribing of controlled substances with a 30 day comment period. A table provided by DEA summarizing the rule is available [here](#).

President’s FY24 Budget Released

On March 9, President Biden released his FY24 budget. For NIH base programs (non-ARPA-H), the President requests a total program level of \$48.6 billion, an increase of \$0.9 billion over FY23. For NIH total, including ARPA-H, the President requested a total of \$51.1 billion, which includes \$2.5 billion for ARPA-H, a \$1 billion over FY23. For NIDA, the budget includes level funding of \$1.663 billion and requests a name change for NIDA to the National Institute on Drugs and Addiction. Read more [here](#).

ARPA-H Announces Strategy for Site Selection

On March 15, the Advanced Research Projects Agency for Health (ARPA-H) released a statement in recognition of its first anniversary, including three announcements: the first funding opportunities through an Agency-wide Open Broad Agency Announcement; an idea competition called the ARPA-H Dash; and additional detail about its site selection strategy. Read more [here](#).

New NIH Study Reveals Shared Genetic Markers Underlying Substance Use Disorders

By combing through genomic data of over 1 million people, scientists have identified genes commonly inherited across addiction disorders, regardless of the substance being used. Read more [here](#).

Study Find Telehealth Treatment Reduced Overdose Rates

A large study from CDC, CMS and NIH researchers in JAMA Psychiatry concluded that between September 2019 and February 2021, patients receiving telehealth drug therapy for opioid use disorder had 33 percent lower adjusted odds of a fatal overdose than those receiving no medication treatment. Read more [here](#).

DeLauro Receives Administration Responses Highlighting Impacts of Proposed House Republican Cuts

On March 22, House Appropriations Committee Ranking Member Rosa DeLauro (D-CT) received information from agency heads in response to [letters](#) sent on January 19 about how House Republican Leadership’s reported proposal to cut fiscal year 2024 discretionary spending back to the fiscal year 2022 enacted level would impact the American people. The agency responses can be found [here](#).

Energy and Commerce Committee Approves HALT Fentanyl Act

The House Energy and Commerce Committee approved a slate of bills, including the HALT Fentanyl Act, which would permanently schedule fentanyl analogues as schedule I substances. Read more [here](#).

FDA Approves Over-the-Counter Naloxone

On March 29, the Food and Drug Administration (FDA) announced the approval of the first over-the-counter (OTC) naloxone product. In the press release, FDA noted that the timeline for when the product will be sold in stores directly to consumers is determined by the manufacturer. Read more [here](#).

Buprenorphine Initiation in the ER Found Safe and Effective for Individuals with OUD

Results from a multi-site clinical trial supported by the NIH showed that less than 1 percent of people with opioid use disorder whose drug use includes fentanyl experienced withdrawal when starting buprenorphine in the emergency department. Read more [here](#).