



SPRING 2024 | ISSUE 3

# APPALACHIAN NODE

The Newsletter for the Appalachian Node

## MORE IN THIS ISSUE:

Study Spotlight: CTN-0139 - 2  
Study Spotlight: CTN-0102XR - 3  
Leadership Spotlight - 4  
Current Studies - 8

## APPALACHIAN NODE MPI UPDATE

---

The Appalachian Node is excited to announce that Dr. Erin Winstanley (MPI) joined the University of Pittsburgh in November 2023 as a Professor of Medicine and she has retained an adjunct appointment at WVU. Upon Dr. Winstanley's departure from WVU, Laura Lander, MSW became the WVU Site PI. Dr. Judith Feinberg is starting a phased retirement in April 2024, after a long and illustrious career as a clinician scientist. We are grateful for her contributions to the Appalachian Node, as well as her service on CTN committees which included the Comorbidities SIG, Rural SIG and on the publications committee. Under the leadership of Drs. Liebschutz and Winstanley, the Appalachian Node will continue to promote impactful research to address substance use disorders.

# STUDY SPOTLIGHT

## CTN-0139: CO-CARE

---

The Appalachian Node is excited to announce its involvement in Dr. Liebschutz's upcoming CTN-0139: Collaborative Care for Polysubstance Use in Primary Care Settings (Co-Care).

Co-Care plans to test a collaborative care (CC) intervention for patients with complex needs and heightened overdose risk, such as those posed by concurrent use of opioids with sedatives, stimulants, or alcohol. CC has 3 components:

1

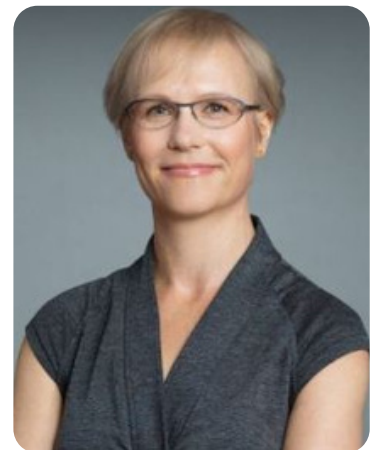
A clinic-embedded *nurse care manager* who engages patients and provides health education, assesses for substance use disorder (SUD), supports the patients' primary care provider (PCP), and directly links patients with moderate-severe SUD to addiction treatment (including office-based-MOUD)

2

Telephone health coaches who use motivational interviewing and cognitive behavioral therapy to motivate and support patients in behavior change

3

Education and support for PCPs, to facilitate their delivery of brief advice and MOUD



Lead Investigator:  
Jennifer McNeely, MD, MS



Co-Lead Investigator:  
Jane Liebschutz, MD, MPH

We will conduct a 2-Phase study in primary care settings (including FQHCs and FQHC-type clinics). In Phase 1, we will plan, develop, and refine a treatment model, and pilot test its feasibility and acceptability. During this phase, we will consider and integrate intervention components from various NIDA, HEAL, and mental health studies, and gather community input. In Phase 2, the team will conduct a randomized controlled efficacy-effectiveness trial with approximately 60 PCPs and 500 adult primary care patients, utilizing a cluster-randomized design.

# STUDY SPOTLIGHT

## CTN-0102XR: RURAL EXPANSION OF MEDICATION TREATMENT FOR OPIOID USE DISORDER

---

The Appalachian Node is excited to announce its involvement in CTN-0102XR: Rural Expansion of Medication Treatment for Opioid Use Disorder: Randomized Controlled Pilot Trial of Extended-release Buprenorphine vs. Sublingual Buprenorphine-naloxone in Rural Settings (NIH HEAL Initiative).r. Laura Lander, MSW, will serve as Site PI at WVU Healthy Minds, Chestnut Ridge Rd.



*Site PI: Laura Lander, MSW*  
WVU Healthy Minds,  
Chestnut Ridge Rd.



*Lead Investigator:*  
Yih-Ing Hser, PhD  
New York University

This randomized, open-label pilot study will assess the feasibility, acceptability, and effectiveness of extended-release buprenorphine (XR-BUP, CAM2038), compared with sublingual buprenorphine-naloxone (SL-BUP) for treatment of opioid use disorder (OUD) among rural patients. Relative effectiveness of XR-BUP vs SL-BUP in rural populations with OUD has not been subjected to research, and this project seeks to rapidly develop new knowledge on the issues to support future large-scale trials. Findings will suggest possible next steps for additional research and will inform scaling of the implementation to improve capacity to utilize extended-release MOUD and increase MOUD access and uptake of extended-release MOUD in rural communities.



# LEADERSHIP SPOTLIGHT: ERIN WINSTANLEY, PH.D.

*Interview conducted by Donna Olejniczak, MPS, MBA*

Dr. Erin Winstanley, Ph.D. is an mPI for the NIDA Clinical Trials Network, Appalachian Node at the University of Pittsburgh. Before joining the School of Medicine at Pitt, Dr. Winstanley served as an Associate Professor at West Virginia University, and had affiliations with the School of Medicine Departments of Behavioral Medicine & Psychiatry and Neuroscience, and the Rockefeller Neuroscience Institute. Within the NIDA CTN she is Co-Chair of the NIDA CTN Rural Special Interest Group (SIG), which is working to advance clinical research on substance use disorders in rural areas.

Dr. Winstanley's research is currently focused on reducing the morbidity and mortality associated with the opioid epidemic, as well as the use of technology to improve access and quality of behavioral health services.



Like so many, Dr. Winstanley's path did not progress in a straight line. When she started her post-graduate career, she began a Ph.D. in Sociology. However, she realized she wanted more direct involvement with health care and so she earned her master's degree and began working with Dr. Tom Babor at the University of Connecticut Health Center. She was involved with the evaluation of an integrated addiction treatment program that was co-located at a local parole office. "Working on that project, I fell in love with addiction science and then went on to earn my doctorate degree" in Public Health. Having the opportunity to interact with research participants, family members and community members that have been impacted by addiction is one of the things that excites her about her work, "Due to stigma, people often do not talk about how addiction has impacted their lives. But then when they find out that you are an addiction scientist, they feel that they can open-up about their experiences and it's important for them to know that we are working really hard to make things better."

***Due to stigma, people often do not talk about how addiction has impacted their lives. But then when they found out that you are an addiction scientist, they feel that they can open-up about their experiences and it's important for them to know we are working really hard to make things better.***

For anyone who may be interested in working in addiction Dr. Winstanley offers this advice, "It's tough work, but incredibly rewarding" helping individuals achieve long-term recovery. "The field of addiction science is a relatively small community compared to other health conditions, which is nice because you can forge life-long connections with your colleagues." Through her professional association, the College on the Problems of Drug Dependence, she has developed a "fantastic network of addiction scientists and clinicians that have become my friends, colleagues and collaborators." She fosters such connections and promotes addiction science by mentoring doctoral students as well as summer interns at WVU.

# LEADERSHIP SPOTLIGHT: ERIN WINSTANLEY, PH.D.

---

While working as the Dissemination Director for the NIDA CTN Ohio Valley Node Dr. Winstanley had the opportunity to work with communities across the Midwest that were impacted by the overdose epidemic. Many of the rural communities did not have the resources found in larger urban area.

Long before the opioid epidemic was even recognized, Dr. Winstanley experienced it on a personal level with a member of her family suffering from chronic pain that led to illicit use of opioids and eventually heroin. “I know the science and I have lived experience of how opioid use disorder impacts families.”

Dr. Winstanley has been involved with the Appalachian Node of the CTN since it was first funded in 2019. “We are leading and participating in several CTN studies (thanks to Drs. Liebschutz, Feinberg and Kawasaki). Our node members are involved with CTN special interest groups and are collaborating on CTN publications. I’m excited to see what we will accomplish in the coming years and thankful for the opportunity to work with everyone in our node.”

***“I’m excited to see what we will accomplish in the coming years and thankful for the opportunity to work with everyone in our node.”***

Dr. Winstanley is thrilled to have recently taken on the role of mPI for the CTN Appalachian Node and she is well suited for this leadership role.

Through her postdoctoral training at The Johns Hopkins Behavioral Pharmacology Research Unit, she worked on complex pharmacotherapy clinical trials of medications to treat stimulant use disorder (SUD). Then as an Assistant Professor at the University of Cincinnati, she was involved with the Ohio Valley Node of the NIDA CTN and so she has known many of the individuals affiliated with the NIDA CTN for more than a decade and feels that “the network is doing critically important work to improve services and outcomes for individuals with substance use disorders”.

She feels working with the Appalachian Node members has been very positive. “We worked collaboratively on the application to get the node funded and clearly that was successful! As a new node, I think our performance to date has been outstanding.”

Dr. Winstanley would like to acknowledge that thanks to Drs. Liebschutz, Feinberg and Kawasaki members of the Appalachian Node are leading and participating in several CTN studies and that our Node members are involved with CTN special interest groups and are collaborating on CTN publications.

Dr. Winstanley sees the research of the Appalachian Node having a broad impact not only in Appalachia rural communities, but nationally in the battle against the opioid epidemic. “As a relatively new node, it’s somewhat hard to predict the greatest impact of our work longitudinally. We have the opportunity to identify creative solutions and strategies to conducting clinical research and care delivery in rural and resource-scarce communities. The overdose epidemic continues to disproportionately impact rural areas and we cannot reduce overdose deaths nationally without involvement of rural communities.”

In the next 5 years her goal for the Appalachian Node is to see demonstrable services for individuals with SUDs and reductions in overdose deaths in our communities. She believes that the CTN studies that our Node is already involved with are providing the opportunity for clinicians and trainees in our communities to learn about state-of-the-art interventions.

# APPALACHIAN NODE ANNUAL MEETING: OCTOBER 2023

## BUILDING A HEALTHIER APPALACHIA: COLLABORATIVE SOLUTIONS TO SUBSTANCE USE DISORDERS ACROSS THE REGION

On October 25, 2023 and as part of the annual Appalachian Node, WVU hosted a meeting entitled “Building a Healthier Appalachia: Collaborative Solutions to Substance Use Disorders Across the Region” at the WVU Alumni Center (Morgantown, WV). The conference was co-facilitated by the WVU Research Office and brought together policy makers, community leaders, treatment providers, trainees and local as well as national researchers (~60 attendees not affiliated with the node).



The goal of the conference was to advance knowledge of empirically based interventions for individuals with substance use disorders and to improve community collaboration to improve outcomes. The conference included nationally renowned speaker Dr. Frances Levin from Columbia University who spoke on research and state-of-the-art treatments for patients with ADHD and co-occurring SUD. Carmen Rosa and Dr. August Holtyn (CCTN) spoke about the role of the NIDA CTN in translating research into practice. Quandra Blackney (NIDA) and Andrew Wilson (Central East ATTC) shared dissemination and implementation resources.

Dr. Jane Liebschutz and Donna Beers shared their evidence-based model of collaborative care for patients with SUDs. There was also a community panel, flash talks from researchers at Pitt and WVU, and a poster presentation and networking session. The lunch was provided by Healthy Kids, which is a local non-profit that provides meals for individuals in recovery housing and they have developed a job-training program for individuals in recovery from SUDs.

During the conference registration process, attendees were asked to report on the most important drug use/SUD in their communities. This content was reviewed and then integrated into a human-centered design activity (facilitated by Dr. Megan Hamm) that occurred during lunch. Individuals were assigned to lunch tables, strategically assembled to facilitate new connections and diverse perspectives, and they need to identify innovative solutions to problems facing our communities today and potential research opportunities.



*Top right:  
Dr. Erin  
Winstanley  
providing  
opening  
remarks.*

*Bottom right:  
Laura Lander  
facilitating a  
panel session.*



# NODE PICTURES



The WVU Team celebrating their 100th Randomization for CTN-0100!



The WVU Team posing next to their new clinic sign.



Members of the Appalachian Node SAG met at the Rockefeller Neuroscience Institute.



Staff from WVU preparing to open registration at the Appalachian Node Conference on October 25, 2023.



Bottom left: Attendees enjoying a farm-to-table meal from a local organization, Healthy Kids, that focuses on helping people find recovery and wellness through the art of cooking.

Bottom right: Dr. Feinberg making a friend after a successful day at the Node Meeting.

# CURRENT APPALACHIAN NODE STUDIES



The lightbulb symbol highlights new studies since the last issue of the newsletter.

**CTN-0080: Medication Treatment for Opioid-dependent Expecting Mothers (MOMs): A Pragmatic Randomized Trial Comparing Two Buprenorphine Formulations.**

UPMC Magee-Womens Hospital: Elizabeth Krans, MD



**CTN-0098A: Exemplar Hospital Initiation Trial to Enhance Treatment Engagement - Comparative Effectiveness Trial of Extended Release Buprenorphine Versus Treatment as Usual for Hospitalized Patients With Opioid Use Disorder (EXHIT ENTRE).**

University of Pittsburgh: Payel Jhoom Roy, MD, MSc

**CTN-0100: Optimizing Retention, Duration, and Discontinuation (RDD) Strategies for Opioid Use Disorder Pharmacotherapy.**

WVU Healthy Minds, Chestnut Ridge Rd: Laura Lander, MSW, LICSW

UPMC Recovery Engagement Program and UPMC Center for Psychiatric and Chemical Dependency Services: Antoine Douaihy, MD

**CTN-0101: Subthreshold Opioid Use Disorder Prevention (STOP) Trial.**

University of Pittsburgh: Jane Liebschutz, MD, MPH



**CTN-0102XR: Rural Expansion of Medication Treatment for Opioid Use Disorder.**

WVU Healthy Minds, Chestnut Ridge Rd: Laura Lander, MSW, LICSW



**CTN-0116: Pharmacist-Integrated Model of Medication Treatment for Opioid Use Disorder.**

University of Pittsburgh: Paul J. Joudrey, MD, MPH



**CTN-0131: Office-Based Methadone versus Buprenorphine to Address Retention in Medication for Opioid Use Disorder (MOUD)- A Pragmatic Hybrid Effectiveness/Implementation Trial.**

University of Pittsburgh: Paul J. Joudrey, MD, MPH



**CTN-0135: Buprenorphine Treatment Engagement and Induction Problems Among Individuals Using Fentanyl.**

University of Pittsburgh: Erin Winstanley, PhD

Penn State University: Sarah Kawasaki, MD



**CTN-0139: Collaborative Care for Polysubstance use in Primary Care Settings (Co-Care)**

University of Pittsburgh: Jane Liebschutz, MD, MPH



**CTN.PITT.EDU**

**#AppalachianNode**