

# M.D. NEWS

Special Feature

## The Many Facets of Addiction

Punyamurtula S. Kishore, M.D., M.P.H.'s Multidisciplinary Approach to Drug and Alcohol Detoxification and Sobriety Maintenance

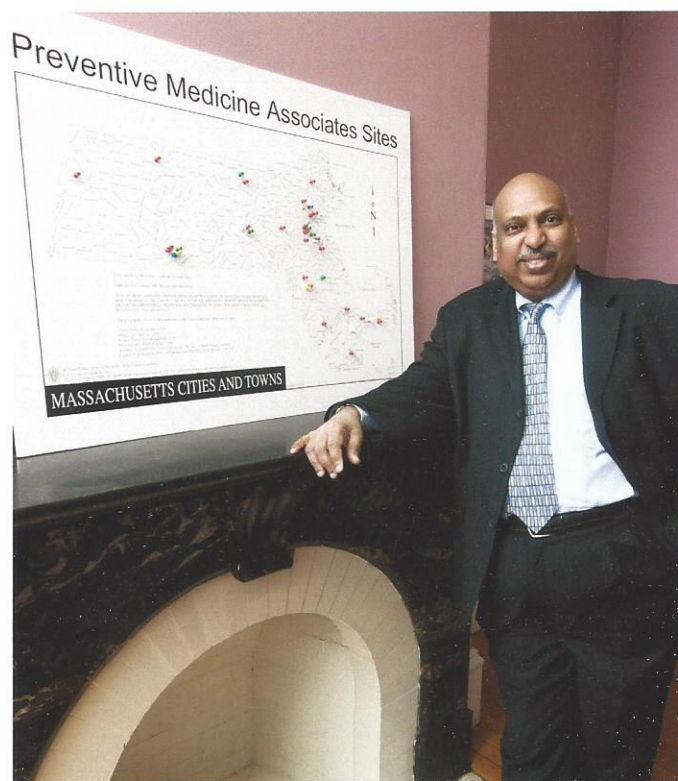
By Christopher Iliades

When Punyamurtula S. Kishore, M.D., was training at the Harvard School of Public Health over 30 years ago, he had no idea that he would become the Medical Director of 27 Preventive Medicine Treatment Centers across the state of Massachusetts, or that his innovative approach to addiction treatment would reach hundreds of thousands of grateful patients. Nor did he think that he would be the founder of the National Library of Addictions, which is a not-for-profit community resource available to patients, professionals and the community at large.

"I came to the treatment of addiction through the back door," says Dr. Kishore. While moonlighting to make ends meet during his training, he became associated with the Washingtonian Center for Addictions in Jamaica Plain. "As a person who trained in Eastern medicine, I was more attuned to the concept of prevention. I was attracted to the field of addiction because there were no easy answers. I saw that it was not a question of curing these patients, but of how to prevent them from relapsing and managing relapses if they occurred," recalls Dr. Kishore. Since then, as a medical director in the state correctional system and at several traditional treatment centers, Dr. Kishore has been fascinated by the many facets of addiction and has dedicated his professional life to improving the care of those who suffer from this baffling disease.

### THE PRIMARY CARE MODEL FOR ADDICTION TREATMENT

In the many years that Dr. Kishore has treated patients with addiction, he has seen what works and what doesn't. He feels that the familiar concept of several days in an inpatient detox followed by support group meetings is inadequate and antiquated. "Modern medicine is always looking for high-tech solutions, but addiction treatment is a low-tech specialty," says Dr. Kishore. He is quick to point out that low-tech does not mean unscientific.



Dr. Kishore bases his treatment on scientific, evidence-based research and results.

His concept for addiction treatment in the primary care setting is supported by the research of Dr. William R. Miller, at the Center on Alcoholism, Substance Abuse and Addiction in Albuquerque, NM. Dr. Miller and his colleagues have been accumulating literature on the best methods for treating addictions since 1979. According to Dr. Miller's research, the most effective method is brief interventions delivered in a primary care



setting. Elements of brief intervention include patient education, patient responsibility, a variety of treatment options, empathy and follow-up.

## A LIFELONG ILLNESS

Dr. Kishore sometimes refers to his patients as “accidental tourists” because no one expects to become an alcoholic or a drug addict, and they all come to addiction in different ways. “Addiction treatment is not just resetting physiology. One of the fastest growing addictions is actually Internet gambling. Addiction has physical, psychological, social and spiritual components that all need to be addressed and every patient is different. To treat addiction you need to think and you need to care,” notes Dr. Kishore.

“Addiction to drugs or alcohol is a lifelong illness. If we are unsuccessful in efforts to prevent addiction to drugs or alcohol, it becomes a chronic condition that may last a lifetime. Our job is to keep them from relapsing and help them find their way back to sobriety if they do relapse. Miller’s group found that, statistically, 40% of patients relapse within the first week at the time when their body calls to them. Another 20% relapse in the second week, when their mind calls to them, and another 10-20% relapse by the fourth week, when their social network calls to them. Our job is to help them defy these odds. It is like helping them to defy the laws of gravity,” explains Dr. Kishore. He has been very successful in helping his patients defy the gravity of relapse.

## Community Outreach Programs

Dr. Kishore’s extensive outreach programs, with their emphasis on prevention, are just one cornerstone of his Community and Family Model of Care of treating addiction, reaching hundreds of adolescents and at-risk students in schools, as well as recovering addicts in halfway and sober houses throughout the region. These outreach programs play a significant role in alcohol and drug awareness and provide the necessary counseling that helps recovering addicts reach their sobriety goals.

Woburn Family Practice partnered with Healthy Malden, a community-based coalition formed in 1993, and is a part of their substance abuse task force. The task force is a collaboration of school personnel, law enforcement, social service agencies and community groups that work to educate, prevent and reduce substance abuse in Malden.

“We go out to the community, to the court system, the school system, Department of Youth Services and the Department of Social Services. We go basically anywhere in the Commonwealth where they need counseling or advice,” says Woburn Family Practice Manager Andrea Martinello.

Martinello says that their multidisciplinary team approach is a model that connects both middle and high school students with the dangers and consequences associated with alcohol and drug use.

“We go in as a team,” she explains. “Dr. Kishore, two recovering addicts, who are called ambassadors and a certified drug and alcohol counselor.”

During the presentation, Dr. Kishore addresses the medical component of alcohol and drug use while the two ambassadors tell their stories.

Patty Roselli, a certified drug and alcohol counselor, focuses on the psychological and social issues, including the increasing peer pressures that middle school students face as they head toward high school. Roselli says that by planting



the seeds of education and awareness at an early age, and, by having young ambassadors talk about their addictions, students realize that addiction has no educational, social or age barrier.

“We bring people in recovery that we feel may touch that area,” says Roselli. “We bring them people who went to college, who talk about if they had made different choices in middle school, they would have done better in high school and then in college,” says Roselli.

Roselli also meets with students who have been suspended for drug or alcohol use and are required to meet with a counselor for a mandated eight-week session. “We are seeing lives transformed at an early age,” she says, “and we’ve seen miracles right here in this office.”

In addition to the school presentations, Dr. Kishore’s team also visits DYS facilities and sober-living communities where they test recovering addicts for illegal drugs and offer counseling.



job issue, an insurance problem, or a related mental health issue. Dr. Kishore refers to these interventions as social scavenging. The mental health professionals, social workers and medical specialists work together as a team to overcome these obstacles in any way they can. This is where much of the innovative thinking and hard work of addiction treatment comes in.

Dr. Kishore refers to the overall treatment plan as “dead-diction” and he prefers to talk about his success in terms of survival rate instead of cure. “Addiction is a disease, like cancer, in which it is more useful to think of success in terms of accumulating years of survival without relapse and prompt treatment of relapse if it does occur. You can also use the analogy of treating a burn patient. It is a constant process and even when the wounds heal the scars remain,” he says. A typical patient will meet with members of the treatment team three to five times each week for the first 90 days and then as needed over the next year or two. During this time, peer support groups are encouraged and patient education continues.

## A COMMUNITY ILLNESS

One of the reasons that primary care addiction has grown from one small office in Brighton in 1996 to 27 offices across the state, besides the program’s success rate, is Dr. Kishore’s willingness to reach out to patients and their families.

“Addiction is a community illness,” he notes. “It was always my goal to get away from the idea of waiting for a bed and then traveling a long distance to one big building. Because addiction treatment is

## Evidence Based Medicine Resources

Some important evidence based addiction medicine resources can be found at the following websites:

- <http://www.drugabuse.gov/PODAT/PODATIndex.html>
- <http://archpsyc.ama-assn.org/cgi/content/full/58/5/503/FIGY0A20042F1>
- <http://www.addictioninfo.org/articles/53/1/What-works-A-summary-of-alcohol-treatment-research/Page1.html>

confined to these few centers, we only have about 1,200 addiction specialists in the entire United States to treat a disease that affects so many people.”

Dr. Kishore has gotten around the shortage of addiction specialists by recruiting experienced doctors from other specialties who are looking for a new challenge. “We don’t just hand our doctors and nurse practitioners a protocol. There is no protocol for addiction. We have guidelines, but after that we want our staff to be thinkers and teachers. The root word for doctor comes from the medieval English word *doctere*, which means ‘to teach,’” notes Dr. Kishore.

Gabrielle Mottola, Executive Administrator of Preventive Medicine Associates Inc. and manager of the Brookline office, explains that analysis of patient data can pinpoint areas where attention is needed.



PHOTO BY DANYELLE DELUCIA



## HOW IT WORKS

Dr. Kishore's Community and Family Model of Care for addiction treatment is divided into three components: home detoxification, sobriety maintenance and sobriety enhancement. "The advantage of detox at home is that home is where most of the relapse triggers are located. The sooner you start to extinguish these triggers the better. Doing detox at home also gets family members involved earlier and educational and emotional support can start immediately," explains Dr. Kishore. Every withdrawal is different and different drugs require different medications. Dr. Kishore's philosophy is to use non-addictive drugs as needed to treat the symptoms of withdrawal at the same time as you begin the long-term treatment of the addiction just as you would any other illness.

Sobriety maintenance is achieved through scheduled check in visits with primary caregivers, urine testing to document continued abstinence and, if needed, by the use of drugs that block cravings. Dr. Kishore may use naltrexone, a drug that blocks craving for both opiates and alcohol, for at least 90 days. "Every wound has a healing time period, and in my experience, 90 days is about the time needed to heal the fresh wounds of addiction," says Dr. Kishore.

Sobriety enhancement is where a lot of brief interventions are needed. Every recovering patient has unique barriers that must be overcome. It might be a family conflict, a

## Offices All Across the State

### **Barnstable Education and Guidance Center**

3261 Main Street, Barnstable — (508) 375-0800

### **Boston Consultation Evaluation Services**

59 Temple Place, #664, Boston — (800) 770-1904

### **Brighton Consultation Evaluation Services**

679 Cambridge Street, Brighton — (800) 770-1904

### **Brookline Family Practice**

32 Kent Street, Brookline — (617) 383-6405

### **Cape Cod Primary Care Associates**

303 Route 28, West Yarmouth — (508) 771-0911

### **Falmouth Family Practice**

332 Gifford St., Suite 1, Falmouth, MA 02540 — (800) 770-1904

### **Fitchburg Primary Care**

76 Summer Street, Suite 45, Fitchburg — (978) 342-3457

### **Framingham Wellness Center**

61 Lincoln St., Unit 306, Framingham — (508) 283-1464

### **Greenfield Family Practice**

5 Park Street, Greenfield — (413) 773-5481

### **Holyoke Medical Practice**

104 Suffolk Street, Holyoke — (413) 315-4825

### **Malden Medical Practice**

155 Main Street, Malden — (781) 324-1200

### **Malden Wellness Center**

388 Pleasant St., Unit 305, Malden — (781) 333-5467

### **National Library of Addictions**

670 Chestnut Street, Springfield  
199 Summer St., Fitchburg — (800) 770-1904

### **Neuroscience Center**

1842 Beacon Street, Suite 204/205 — (617) 278-1470

### **North Andover Family Practice**

451 Andover Street, N. Andover — (800) 770-1904

### **Norton Family Practice**

10 West Main Street, Norton — (774) 430-3386

### **Pittsfield Family Practice**

740 Williams Street, Suite 10, Pittsfield — (413) 395-0860

### **Primary Care Associates of Sandwich**

141 Route 6A, P.O. Box 18, Sandwich — (508) 888-9306

### **Quincy Medical Practice**

59 Coddington Street, Suite 103, Quincy — (617) 328-5700

### **Quincy International Health Center**

275 Hancock Street, Quincy — (617) 479-4100

### **Springfield Family Practice**

125 Liberty Street, Suite 408, Springfield — (413) 781-6410

### **Springfield International Health Center**

760 Chestnut Street, Springfield — (413) 214-7486

### **Springfield Wellness Center**

780 Chestnut Street, Suite 1, Springfield — (413) 304-2144

### **Taunton Primary Care Associates**

63 Winthrop Street, Taunton — (508) 802-5839

### **Vineyard Healthcare Associates**

455 State Road, Suite 13, Vineyard Haven — (508) 693-3900

### **Waltham Family Practice**

20 Hope Avenue - G1, Waltham — (781) 788-0005

### **Wareham Wellness Center**

166 Main Street, Wareham — (508) 295-6700

### **West Roxbury Wellness Pavilion**

1208b VFW Parkway, Unit 305, W. Roxbury — (617) 477-8276

### **Weymouth Medical Practice**

884 Washington St., 2nd Floor, Weymouth — (781) 337-0550

### **Woburn Family Practice**

3 Baldwin Green Common, Woburn — (781) 376-1771

### **Worcester Family Practice**

16 Belmont Street #12, Worcester — (508) 770-1602



PHOTO BY DANYELLE DELUGIA



## Ambassadors Show Faces of Recovery

Both Jennifer Ulich and Ashley West spoke with *M.D. News* about their addictions and subsequent treatment based on Dr. Kishore's unique and successful at home detox program. Both have since become ambassadors for the National Library of Addictions, speaking at public events and telling their stories so as to help others.

### Jennifer Ulich

Raised on the South Shore, Jennifer Ulich was the youngest of five children and grew up in a typically middle-class family. As a straight "A" student, she won a full academic scholarship to Boston University, where she admits to partying "here and there." Her eight-year-long battle with drugs, however, began with a single pill.



"When I was 23, I tried Oxycontin and was hooked," she recalls. "I did Oxycontin every day for four years and eventually switched to heroin because it was cheaper. I was stealing money, lying to everyone. I absolutely hated myself and wanted to die but I was too afraid to kill myself. It was awful."

At the age of 28, Ulich was arrested for possession of heroin and entered court-ordered rehab. It was the first of six detox programs.

It was at one of these detox programs that Ulich first learned about Dr. Kishore and his home detox program.

"I came here to do at home detox from Suboxone prescribed for a maintenance program," she recalls. "It took

three weeks to get out of my system."

Once her daily urine tests indicated that she had completed the detox process, Ulich was given an injection of Vivitrol and was surprised how effective it was. "The obsession was gone immediately. It then turned into fleeting thoughts and these fleeting thoughts became less and less frequent," she says. "Now they are nonexistent. I recommend Vivitrol 100%."

Ulich credits not only Vivitrol for her success, but also Dr. Kishore and his multidisciplinary staff who provide the much-needed aftercare absent from so many detox programs.

"Everything ends in regular detox programs," explains Ulich, "but not here. It is continuing aftercare. Recovery doesn't end — it is for the rest of your life."

Ulich now works full time for Dr. Kishore where she offers guidance, comfort and support to patients in detox and recovery. She also speaks to those calling Dr. Kishore's 24-hour hotline.

"I can relate to them because I am a recovering heroin addict," she says. "I am not judging them. I understand them. I have been there."

### Ashley West

Ashley West began experimenting with Oxycontin while in high school and quickly moved onto heroin because it was less expensive.

"The only thing that mattered was getting heroin," she says. "I lost my job, my friends, got arrested twice for shoplifting and stole thousands of dollars from my family."

While on break from college, West's mother found her needles and heroin and immediately took her to the hospital, entering her into a three-day detox program. But after being released, she got high right away. She went on to attend several other detox programs but found that, with little or no after care, she would resume her addictive behaviors.

West's mom learned of Dr. Kishore's detox program and Vivitrol through a friend whose son was in recovery and working as an EMT.

West has now been on monthly Vivitrol injections for 19 months now and says that she doesn't even think about cravings anymore. She says that Dr. Kishore's involvement with his patients and their families helps those in recovery stay on the right path.

"I can remember times when my mom called Dr. Kishore at 4 a.m. and he talked to her and helped her. He is one person who really cares about his patients and he sees what people are capable of," she says. "I don't know if I could have ever gotten sober if I hadn't come here."



