

Opioid Education: What You Need to Know

Welcome!

- All lines are muted, so please ask your questions in Q&A

We will get started shortly!



The Quality Improvement Services Group of
ALLIANT HEALTH SOLUTIONS

QIN-QIO

Quality Innovation Network -
Quality Improvement Organizations

CENTERS FOR MEDICARE & MEDICAID SERVICES
iQUALITY IMPROVEMENT & INNOVATION GROUP

Opioid Education: What You Need to Know



August 4, 2021

Hosted by:

Elizabeth "Libby" Bickers, LCSW

AIM Manager, Behavioral Health for Alliant Quality

 **ALLIANT**
QUALITY

The Quality Improvement Services Group of
ALLIANT HEALTH SOLUTIONS

QIN-QIO

**Quality Innovation Network -
Quality Improvement Organizations**

*CENTERS FOR MEDICARE & MEDICAID SERVICES
iQUALITY IMPROVEMENT & INNOVATION GROUP*

Elizabeth "Libby" Bickers, LCSW

CLINICAL SOCIAL WORKER

I have been a social worker for over 20 years in multiple areas of healthcare, primarily hospice. I have also worked in dialysis, home health, long term care and inpatient hospital settings. I also worked in higher education as Director of Field Instruction at my alma mater, Valdosta State University. I have been a clinical reviewer, for over 5 years, with Alliant Health Solutions. I have been married for 23 years and have 2 children, a daughter and a son.

I enjoy being outside with my 2 rescue dogs, family outings to local places of interest and time with my extended family as well. We are active in our church and participate in mission work throughout the year. I love many kinds of music and you may often find me cooking while enjoying some fun music.

Contact: elizabeth.bickers@alliantaso.org



Tanya Vadala, Pharm.D.

MEDICATION SAFETY PHARMACIST

Tanya is an IPRO pharmacist with 18 years of clinical pharmacy, community pharmacy, academia, quality improvement and medication safety experience. Prior to joining IPRO, she worked at various community pharmacies and taught at Albany College of Pharmacy and Health Sciences in Albany, NY. She specializes in Medication Therapy Management (MTM), medication reconciliation, opioids, immunizations, and patient self-care. Her formal teaching experience includes courses in pharmacy practice and clinical experiential teaching.

Contact: TVadala@ipro.org



Objectives

- Define opioids and recognize common opioids
- Discuss common opioid side effects and dangers of opioid use
- Review the impact of opioid use on older adults
- Analyze opioid overdose and the use of naloxone
- Recognize best practices to avoid and treat opioid overdose

Background

- The Centers for Disease Control and Prevention (CDC) reports that 70,237 Americans died from drug overdoses in 2017, of which 47,600 were opioid related. Also in 2017, 11.1 million people reported misuse of prescription opioid pain medications, nearly 900,000 people used heroin, and 2.1 million people suffered from an opioid use disorder.¹
- While opioid prescribing has decreased since 2012, overdose and transitioning to illicit opioids has become a serious issue²

Frightening Statistics³

Increases in reported drug overdose death : Nov 2019 – Nov 2020

Alabama 28%

Florida 36.9%

Georgia 30.6%

Kentucky 54.8%

Louisiana 44.4%

North Carolina
30.3%

Tennessee
42.9%

What is an Opioid?

- A natural, semisynthetic, or synthetic substance that typically binds to the same cell receptors as opium and produces similar narcotic effects (as sedation, pain relief, slowed breathing, and euphoria)⁴
- Opioids can be prescription or illicit/illegal

Common Prescription Opioids

- Hydrocodone (brand name examples: Lortab[®], Vicodin[®], Norco[®])
- Oxycodone (brand name example: Oxycontin[®])
- Oxymorphone (brand name example: Opana[®])
- Codeine (brand name example: Tylenol with Codeine #3[®])
- Morphine (brand name example: MS Contin[®])
- Fentanyl (brand name example: Duragesic[®])
- Methadone
- Tramadol (brand name example: Ultram[®])

Common Opioid Side Effects

- Dizziness
- Sedation
- Nausea
- Vomiting
- Sweating
- Constipation



Dangers of Opioid Use

- Opioid use disorder
- Overdose
- Falls
- Unresponsiveness
- Decreased:
 - Blood pressure
 - Pulse
 - Pulse oximetry
 - Respirations



Opioid Use in Older Adults

- Increased risk for opioid overdose and side effects because of:
 - Decreased metabolism
 - Decreased kidney and liver function
 - Dehydration
 - Altered mental status
 - Decreased mobility
 - Multiple medications



Opioid Overdose Can Be Due to Many Factors⁵

- Deliberate misuse or overdose
- Use of an illicit opioid
- Opioid taken with other medications
- Opioid used with alcohol
- Prescriber, pharmacist, patient error

- **Overdose can occur even when a prescription opioid is used as prescribed.**

Overdose Treatment = Naloxone⁶



WHAT IS NALOXONE?

Naloxone is a medication designed to rapidly reverse opioid overdose.

Available in three FDA-approved formulations: injectable, autoinjectable and prepackaged nasal spray.

Naloxone

- Naloxone only helps when it is available
- Naloxone should be prescribed with EVERY opioid prescription
 - Most insurance plans cover naloxone with little or no copay
- Patients, family and community members can get naloxone at many sites (training required)⁷
 - <https://harmreduction.org/resource-center/harm-reduction-near-you/>



Breakout Sessions

Opioid Safety Tips

- Because opioids can be dangerous and addictive, opioid medications should be stored safely where others (especially children) cannot get them
- ONLY take opioids if absolutely needed
- Always take the lowest dose possible of any opioid medication
- Never take more medication than the doctor recommends
- Do not start a new medication without talking to your doctor or pharmacist first
- Do not take medication that is not prescribed to you or share your medications with others
- Avoid taking opioids with alcohol
- Avoid taking opioids with illegal drugs
- Dispose of your unused or expired opioid prescriptions safely by following recommendations of the Food and Drug Administration or through your community prescription drug take-back program.^{8,9}
- If you experience any side effects from a medication, call your doctor or pharmacist right away
- Let your doctor or pharmacist know if you had to use an opioid reversal medication since your last doctor's appointment or pharmacy visit

Proper Drug Disposal

Preferred:

- Drug Take Back Locations⁸

If no locations are near you:

- Household trash⁹
- Flushing¹⁰

References

1. <https://www.hhs.gov/opioids/sites/default/files/2018-12/naloxone-coprescribing-guidance.pdf>
2. <https://www.cdc.gov/drugoverdose/maps/rxrate-maps.html>
3. <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>
4. <https://www.merriam-webster.com/dictionary/opioid#medicalDictionary>
5. <https://store.samhsa.gov/sites/default/files/d7/priv/sma18-4742.pdf>
6. <https://www.hhs.gov/opioids/treatment/overdose-response/index.html>
7. <https://harmreduction.org/resource-center/harm-reduction-near-you/>
8. <https://apps2.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s1>
9. <https://www.fda.gov/consumers/consumer-updates/where-and-how-dispose-unused-medicines>
10. <https://www.fda.gov/drugs/disposal-unused-medicines-what-you-should-know/drug-disposal-fdas-flush-list-certain-medicines>

Additional Resources

- <https://www.hhs.gov/surgeongeneral/priorities/opioids-and-addiction/naloxone-advisory/index.html>
- https://www.cdc.gov/drugoverdose/pdf/App_Opioid_Prescribing_Guideline-a.pdf
- <https://www.drugabuse.gov/publications/drugfacts/naloxone>
- <https://www.samhsa.gov/data/release/2019-national-survey-drug-use-and-health-nsduh-releases>
- <https://www.cdc.gov/drugoverdose/data/statedeaths.html>
- <https://www.drugabuse.gov/drug-topics/opioids/opioid-overdose-crisis>
- <https://www.narcan.com/hcp/signup/>

CMS 12th SOW Goals



Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings



Chronic Disease Self-Management

- ✓ Increase performance on ABCS clinical quality measures (i.e., aspirin use, blood pressure control, cholesterol management, cardiac rehab)
- ✓ Identify patients at high-risk for developing kidney disease & improve outcomes
- ✓ Identify patients at high risk for diabetes-related complications & improve outcomes



Quality of Care Transitions

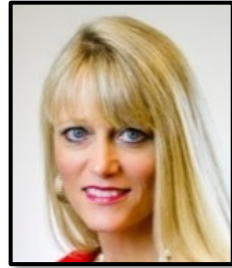
- ✓ Convene community coalitions
- ✓ Identify and promote optimal care for super utilizers
- ✓ Reduce community-based adverse drug events



Nursing Home Quality

- ✓ Improve the mean total quality score
- ✓ Develop national baselines for healthcare related infections in nursing homes
- ✓ Reduce emergency department visits and readmissions of short stay residents

Making Health Care Better *Together*



Georgia, Kentucky,
North Carolina and Tennessee
Leighann Sauls

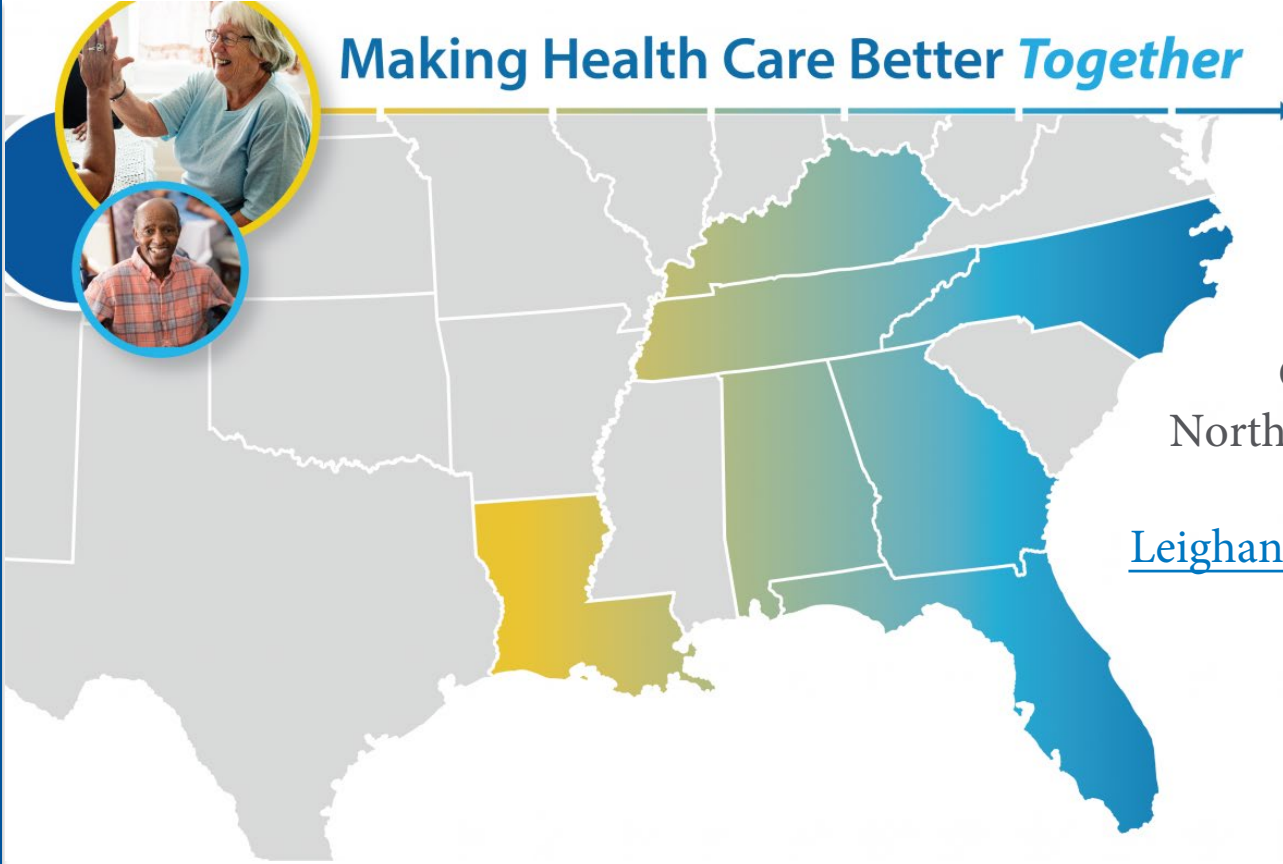
Leighann.Sauls@AlliantHealth.org



Alabama, Florida and Louisiana
JoVonn Givens

JoVonn.Givens@AlliantHealth.org

Program Directors



Making Health Care Better Together

ALABAMA • FLORIDA • GEORGIA • KENTUCKY • LOUISIANA • NORTH CAROLINA • TENNESSEE



@AlliantQualityOrg



@AlliantQuality



Alliant Quality



Alliant Quality

This material was prepared by Alliant Health Solutions, a Quality Innovation Network – Quality Improvement Organization (QIN – QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. 12SOW-AHSQIN-QIO-TO1CC-21-944-08/02/21



QIN-QIO

Quality Innovation Network -
Quality Improvement Organizations
CENTERS FOR MEDICARE & MEDICAID SERVICES
QUALITY IMPROVEMENT & INNOVATION GROUP