

Opioid Crisis Update

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Disclosures

- We do not have any conflicts of interest to disclose

Learning Objectives

- Identify key historical practices and events which contributed to the opioid crisis
- Describe the social impacts of the opioid crisis
- List current strategies to combat inappropriate opioid prescribing and use
- Discuss ways that pharmacy technicians can help combat the opioid crisis

Discussion

What comes to mind when you hear the term "opioid crisis?"

Opioid Crisis



CDC. Available at: <https://www.cdc.gov/drugoverdose/epidemic/index.html>. Accessed: Aug. 1, 2018

Opioid Background

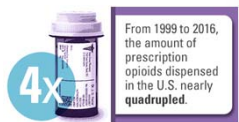
- 1803: Discovery of morphine
- Mid-1870s: Heroin was introduced by the Bayer Company of Germany
- 1902: American Medical Association provides warnings on the risk of heroin addiction



Business Insider. Available at: <https://www.businessinsider.com/yes-bayer-promoted-heroin-for-children-here-are-the-ads-that-prove-it-2011-11>. Accessed August 13, 2018. Pharmacotherapy Self-Assessment Program (PSAP) Book 2. ACCP; 2015:125-142

Wave 1: Prescription Opioids

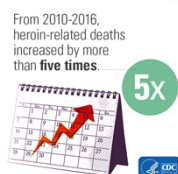
- 1986: "Chronic use of opioid analgesics in non-malignant pain: Report of 38 cases"
- 1995: Introduction of extended-release oxycodone (OxyContin®)
- 1995: Pain as the 5th vital sign



CDC. Available at: <https://www.cdc.gov/drugoverdose/epidemic/index.html>. Accessed: 1 Aug. 2018.
Kolodny, A. et al. (2015). *Annual Review of Public Health*, 36(1):559-574.

Wave 2: Heroin

- 2007: Purdue Pharma pleads guilty to charges regarding the misbranding of extended-release oxycodone (OxyContin®)
- Heroin becomes a cheaper, more easily available alternative

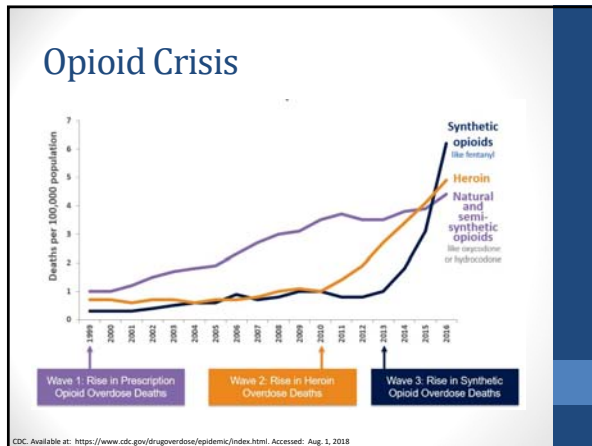


CDC. Available at: <https://www.cdc.gov/drugoverdose/epidemic/index.html>. Accessed: Aug. 1, 2018.
Kolodny, et al. *Annual Review of Public Health*, 36(1): 559-574.
Marcia L. Mendrum, et al. *APPH*, 106(8):1365-1366.

Wave 3: Synthetic Opioids

- 2006: The CDC collaborates with medical examiners, law enforcement agencies, and public health departments to establish surveillance systems for nonprescription fentanyl-related deaths
- Fentanyl-laced heroin becomes more common
 - The number of fentanyl-related overdose deaths doubled between 2012 and 2014
 - There was a 462% increase in the amount of fentanyl seized at US borders between 2015 and 2016

Cala, M. (2014). *Long-Term Trends in Opioid Use in the United States*.
CDC. Available at: <https://www.cdc.gov/drugoverdose/epidemic/index.html>. Accessed: Aug. 1, 2018.
D. Ciccarone, et al. *International Journal of Drug Policy*, 44(2017), 107-111.



- ### Social Impact
- Public Health
 - Infection risk
 - Violence
 - Children
 - Foster care
 - Neonatal Abstinence Syndrome
 - Economic
 - Healthcare
 - Labor
- Brookings. Accessed at <https://www.brookings.edu/blog/brookings-now/2017/10/25/the-far-reaching-effects-of-the-us-opioid-crisis/>. Accessed: August 14, 2018.
Oxanne Meyer, et al. (2014). Population Health Management; 17 (6) 672-687

Opioid Addiction

- https://www.youtube.com/watch?v=NDVV_M_CSI

National Geographic. Available at: https://www.youtube.com/watch?v=NDVV_M_CSI. Accessed 1 Aug 2018.

Opioid Use Disorder

- **Mental illness** with a diagnosis in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)
- Pattern of opioid use leading to **clinically significant impairment** or distress
 - Physiological dependence
 - Tolerance
 - Withdrawal
 - Craving

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5®). Washington, D.C.: American Psychiatric Publishing.

Screening Tools

- Toxicology screening
- Assessments/Questionnaires
 - Alcohol, drugs, both
 - Adolescents vs. adults
 - Self-administered vs. clinician administered

National Institute on Drug Abuse. Available at: <https://www.drugabuse.gov/nidamed-medical-health-professionals/tool-resources-your-practice/screening-assessment-drug-testing-resources/chart-evidence-based-screening-tools>. Accessed on 14, August 2018

Key Terms

- **Physical dependence:** Occurs when the body naturally adapts to regular exposure
- **Tolerance:** A condition in which higher doses of a drug are required to produce the same effect achieved during initial use, which often leads to dependence.
- **Withdrawal:** Symptoms that occur after regular use of a drug has been abruptly reduced or stopped. Symptom severity depends on the type of drug, the dosage, and how long and how frequently it has been taken.
- **Craving:** A powerful, often overwhelming desire for drugs

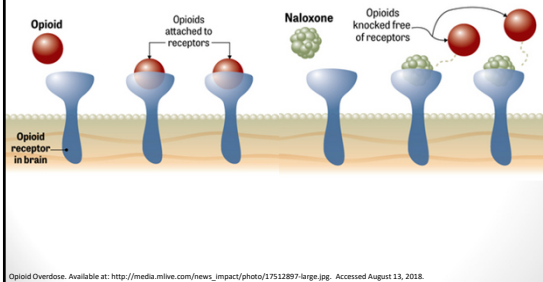
Drugabuse.gov. Available at: <https://www.drugabuse.gov/publications/media-guide/glossary>. Accessed 1 Aug. 2018.

Risk Factors for Opioid Use Disorder

- Overlapping prescriptions from multiple physicians and pharmacists
- Mental illness or history of alcohol or substance abuse
- High daily doses of opioids
- Living in rural areas and having low income

CDC. Available at: <https://www.cdc.gov/drugoverdose/epidemic/index.html>. Accessed: Aug 1, 2018

Naloxone



Opioid Overdose. Available at: http://media.mlive.com/news_impact/photo/17512897-large.jpg. Accessed August 13, 2018.

Assessment Question

Which of the following is NOT a wave/phase of the opioid epidemic?

- A. Prescription opioids
- B. Methamphetamine
- C. Heroin
- D. Synthetic opioids

Assessment Question

Tolerance _____

- A. Occurs when the body naturally adapts to regular exposure.
- B. Is a condition in which higher doses of a drug are required to produce the same effect achieved during initial use, which often leads to dependence.
- C. Is a collection of symptoms that occur after regular use of a drug has been abruptly reduced or stopped. Symptom severity depends on the type of drug, the dosage, and how long and how frequently it has been taken.
- D. Is a powerful, often overwhelming desire for drugs.

Tactics to Combat Opioid Crisis

- Legislation and rule changes
- Change accreditation standards
- Change prescribing practices
- Rx monitoring programs
- Naloxone
- Education
- Drug take-back programs
- Insurance limitations
- Access to treatment and recovery

National Legislation

- Comprehensive Addiction and Recovery Act of 2016 (CARA)
 - Prevention
 - Treatment
 - Recovery
 - Law enforcement
 - Criminal justice reform
 - Overdose reversal
- Amends CSA to allow CII partial fills



114th U.S. Congress. Available at: <https://www.congress.gov/bills/114th-congress/senate-bill/524/text>. Accessed July 29, 2018
Drug Enforcement Administration. Available at: <https://www.deadiversion.usdoj.gov/pubs/manuals/pharm2/index.html>. Accessed August 2, 2018

Idaho Law and Rule Changes

- Idaho Board of Pharmacy
 - Amended rule 114 (2017)
- Idaho State
 - Required annual registration with prescription monitoring program (PMP) (2017)
- Naloxone prescribing, possession, and administration



Idaho State Board of Pharmacy. Available at: <https://nabp-pharmacy/wp-content/uploads/2016/06/10032017.pdf>. Accessed August 31, 2018
Idaho State Board of Pharmacy. Available at: <https://bop.idaho.gov/pmp/>. 2017. Accessed August 3, 2018

The Joint Commission

- Certifies health-care organizations
- Goal to improve public health-care
- Revised pain management standards (2018)
- New requirements:
 - Clinical leadership team
 - Non-pharmacologic modalities
 - Provide access to PDMP
 - Improve pain assessment
 - Patient engagement and education
 - Facilitate referral

Joint Commission. Available at: https://www.jointcommission.org/topics/pain_management.aspx. Accessed August 14 2018

Assessment Question

A patient arrives at your Idaho pharmacy with a prescription for hydrocodone/acetaminophen 5/325 #30 after a dental appointment. She is apprehensive to take pain medication and only wants to receive a "couple of tablets just in case". According to CARA, your pharmacy should do which of the following?

- A. Fill JK's prescription for the requested amount and inform her that she will lose the remainder of tablets on the prescription
- B. Refuse to partial-fill JK's prescription because it is more work to do partial fills
- C. Fill JK's prescription in accordance with state and federal regulations and inform JK that if she decides to fill the remainder of the prescription, it must be within 30 days of the written date
- D. Refuse to partial fill JKs prescription because it is against state law and JK is obviously not a long-term care or hospice patient

Change Prescribing Practices

- CDC Guidelines for Prescribing Opioids for Chronic Pain (2017)
 - Not intended for end-of life care
 - Lower doses
 - Monitor and discontinue
- Appropriate prescribing involves:
 - Pain assessment and patient selection
 - Risk assessment and stratification
 - Careful drug choice
 - Structured therapy

Centers for Disease Control and Prevention. Available at: https://www.cdc.gov/drugoverdose/pdf/Guidelines_Factsheet-a.pdf. 2017. Accessed July 31, 2018

Prescription Drug Monitoring

- 1997: Idaho PMP established
 - Electronic database CII-IV substances
 - Pharmacist and delegates may access
 - Identify or prevent drug abuse and diversion
 - Must report within 1 business day
 - CPhT participation crucial



Idaho State Board of Pharmacy. Available at: <https://bop.idaho.gov/pmp/>. 2017. Accessed August 3, 2018

Drug Monitoring (Continued)

- Nationwide: 52 PDMPs
- 21 connected to Idaho PMP
- Connected to all border states
- Integrated PMP with electronic health records (EHR)



Drug Enforcement Administration. Available at: https://www.deadiversion.usdoj.gov/mnags/pharm_awareness/conf/2017/oct_2017/mitchell.pdf. Accessed August 3, 2018
Idaho Division of Public Health. Available at: http://healthandwelfare.idaho.gov/Portals/0/Health/Epi/Disease%20Summaries/155014_HW_ID_Disease_Bulletin_OCT_2017.pdf. Accessed July 28, 2018.

Naloxone Products

- Naloxone (Evzio®) 0.4 mg
 - Ready-to-use auto-injector (IM)
 - Cost: \$3,800 (box of 2)
- Naloxone (Narcan®) 4 mg
 - Ready-to-use nasal spray
 - Cost: \$130 (box of 2)
- Naloxone 2 mg/mL
 - Ready-to-use syringe (IM)
 - Cost: \$30
- Know products, availability, and coverage



National Institute on Drug Abuse. Available at: <https://www.drugabuse.gov/related-topics/opioid-overdose-reversal-naloxone-narcan-evzio>. Accessed August 13th, 2018.
Good Rx. Available at: <https://www.goodrx.com/naloxone/drug-name-naloxone>. Accessed August 13, 2018.

Naloxone Rules and Laws

- Idaho: pharmacist prescribing to anyone
- Less prohibitive
 - Good Samaritan law
 - Remove liability
- Supply and train:
 - First-responders
 - Public agencies
- Goal: increase usage and save lives

Idaho State Board of Pharmacy. Available at: https://bsp.idaho.gov/code_rules/2018-07-02_2018_IDBOP_LawBook.pdf. Accessed July 29, 2018
Idaho Division of Public Health. Available at: http://healthandwelfare.idaho.gov/Portals/0/Health/Epi/Disease%20Summaries/155014_IHW_ID_Disease_Bulletin_OCT_2017.pdf. Accessed July 28, 2018.

Education

- Physicians:
 - Physician champions
 - Prescriber report cards
 - Prescribing habits
- Public:
 - Opioid overdose
 - Storage and administration of naloxone
 - Emergency procedures



Idaho Division of Public Health. Available at: http://healthandwelfare.idaho.gov/Portals/0/Health/Epi/Disease%20Summaries/155014_IHW_ID_Disease_Bulletin_OCT_2017.pdf. Accessed July 28, 2018.
Idaho State Board of Pharmacy. Available at: https://bsp.idaho.gov/code_rules/2018-07-02_2018_IDBOP_LawBook.pdf. Accessed July 29, 2018

Drug Take-Back Programs

- Idaho Office of Drug Policy
- Primary prevention initiatives:
 - Drug take-back program
 - Lock Your Meds campaign
- Local sheriff and police departments
- CPhT knowledge and communication key

Idaho Office of Drug Policy. Available at: <https://odp.idaho.gov/prescription-drug-take-back-program/>. Accessed July 31, 2018

Assessment Question

A patient at the front counter of your pharmacy has a bag full of expired prescriptions in her hand and wants to know what she should do with the medications. As a responsible pharmacy technician, you should (select all that apply):

- A. Recommend she look up drug take-back locations at the following website: <https://odp.idaho.gov/prescription-drug-take-back-program/>
- B. Tell her that this pharmacy doesn't return medications and that once the medication leaves the pharmacy it is no longer our responsibility
- C. Recommend she flush them down the toilet or throw them in the trash
- D. Recommend she bring them in to her local police department or sheriff's office

Insurance Limitations

- Medicare/Medicaid (2019 plan year)
 - Excludes cancer, hospice, and long-term care patients
 - Opioid naïve: hard stop for >7-day supply
 - High risk: overutilization and monitoring system (OMS)
- CVS Caremark® (2018)
 - Based on CDC guidelines
 - 7-day acute limit
 - ER/IR step therapy
 - Max 90 morphine milligram equivalents (MME)/day

Center for Medicare and Medicaid Services. Available at: <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2018-Fact-sheets-items/2018-04-02-2.html>. Accessed July 29, 2018
CVS Caremark. Available at: https://www.caremark.com/portal/asset/Opioid_Reference_Guide.pdf. Accessed August 1, 2018

Pharmacy Limitations

- Walmart and Sam's Club pharmacies nationwide
 - Opioid Stewardship Initiative (2018)
 - Max 7-day supply for opiates
 - Max 50 MME/day
 - E-prescribing only for CII-IV substances by Jan. 2020



Walmart. Available at: <https://news.walmart.com/2018/05/07/walmart-introduces-additional-measures-to-help-curb-opioid-abuse-and-misuse/>. Accessed August 13, 2018.

Better Access to Treatment

- Idaho Division of Behavioral Health granted \$2 million (2017)
 - Medication-Assisted Treatment (MAT)
 - Methadone and buprenorphine/naloxone (Suboxone®)
 - Evidence-based treatment models
 - Referral to MAT services
 - 250 Idahoans per year

Idaho Division of Public Health. Available at: http://healthandwelfare.idaho.gov/Portals/0/Health/Epi/Diseases%20Summaries/155014_HW_ID_Disease_Bulletin_OCT_2017.pdf. Accessed July 28, 2018.

Diversion Prevention at SARMC

- Pyxis® Audit Reports
 - Nursing
 - CPhTs
 - Scheduled
- Un-documented waste
 - Perpetual inventory
 - Monthly inventory



Becker's Hospital Review. Available at: <https://www.beckershospitalreview.com/100-great-hospitals-in-america-2017/saint-alphonsus-regional-medical-center-17.html>. Accessed August 13, 2018.

Technicians Role in Opioid Crisis

- Institutional and community settings
- Knowledge of state and federal law
- Participation in Idaho PMP
- Knowledge of naloxone products
- Knowledge of drug take-back locations
- Controlled substance audits and inventories

Summary

- The opioid crisis continues...
- Large social and economic toll
- Various strategies
- Coordinated and sustained efforts
- Technicians play a crucial role

Idaho Society of Health-System Pharmacists

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