Prescription Opioid Overdose Prevention in Portland Metro

February 2016

Paul Lewis, MD, MPH
Multnomah and Tricounty Health Officer
Social Environment
Expectation about effectiveness and safety of opioids
Family and peer experiences
Social and financial stress
Lack of social services and support

Healthcare Environment
No insurance coverage for alternative treatments
Few providers for alternative treatments
Limits on Medically Assisted Treatment
Shortage of addiction providers
Inadequate or ineffective guidelines

Prescriber Factors
Increased Pain Awareness
Concern re: Pt satisfaction/liability
Pharma promotion of opioids
Professional norms
Short appointments
Perceived lack of options
Lack of pain specialists
Knowledge, Skills, Abilities re: chronic pain
Inadequate mentoring, monitoring of practice
Deception by patients

Patient Factors leading to Rx
Adv Childhood Events,
Pain, Stress, Anxiety, Depression
Expectations, Lack of Trust

Appropriate Rx
Diversion

Dependence
Addiction
Overdose
Hospitalization
Death
Transition to heroin
Consequences of Opioid Prescriptions

- **Public Expectations**: Re:Pain
- **Patient Pain**: Perceived Standards of Care, Opiate Rx Considered, Knowledge, Skills, Ability
  - Opiate Rx
    - Appropriate and Safe
    - Diversion
    - Dependence, Addiction
  - Overdose
    - Death, Hospital
    - Overdose

**Heroin Users**
Multi-Level Interventions
To Improve Safety
Tricounty Regional Opiate Safety

2014

HCWC Support Half-day Summit Workgroup(s) convened Draft Standard Developed

2015

WG expand Standard Finalized Appendix written Implementation Communication Plan Multi-partner Agreement announcement 2nd Opiate Safety Initiative Launched

2016

Public Education Patient/Provider Ed Expand MAT Expand Addiction Rx Replicate successful Chronic Pain Models Monitor Outcomes Expand Naloxone Availability Drug Disposal Regional Summit
Regional Guideline Development Process

- Leveraged Healthy Columbia Willamette Hospital, CCO, and County partnership
- Identified champion to lead workgroup
- Adopted modified Delphi Process
- Extensive use of pre-meeting surveys
- Addition of non-HCWC stakeholders
- Communication planning linked to Multnomah County Report
Guideline Components

https://multco.us/file/47545/download

• Scope: Chronic Non-cancer, non-terminal pain
• Risk Assessment
  – PDMP, tools, UDS
• Informed consent, treatment agreements
• Dosing limit (120 MED)
• Comprehensive treatment plan
• Behavioral health plan
• Avoid benzos and other sedatives
• Refer to substance use disorder treatment
• Consider naloxone co-prescribing
Healthy Columbia Willamette Opioid Prescribing Standards

• Standing collaboration between 4 Portland-Vancouver county Public Health Departments, all regional hospitals (community benefit), 2 metro CCOs

• Assessment completed in 2013 identified accidental death as leading cause for years of life lost
  – Drug overdose major contributor
  – Prescription drug workgroups launched
    • Standards, Education, Monitoring