

Decrease Risk of Harm from Opioids

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PAIN

- Progression - OUD
- Adverse Event

OUD

- Fentanyl
- All the Other Risks

OVERDOSE

Treating Opioid Use Disorder

- Evidence based Treatments:
 - Agonist Therapy
 - Methadone
 - Buprenorphine
 - Antagonist Treatment
 - Depot Naltrexone
- Make these treatments accessible to people who need them when they need them
 - Expansion of OTP capacity (limited)
 - Expand Office Based Treatment with Buprenorphine
 - Instead of Inpatient Detox – Transition to Agonist Therapy
 - Offer Buprenorphine in the ED

Changing Opioid Prescribing

- Going forward: prescribe more effective and safer (non-opioid) medications for chronic non-cancer pain.
- When opioids are use – make the prescription \leq 3-5 Days
- For veterans currently on opioids long-term opioids
 - VA research into measuring risk
 - VA protocols for addressing prescribing for high-risk patients
 - Begin clinical change in the highest-risk patients
 - No blame
 - Offer alternative therapies first
 - Flexibility

(RIOSORD)

**Development of a Risk Index for Serious Prescription
Opioid-Induced Respiratory Depression or Overdose in
Veterans' Health Administration Patients**

Zedler B, Xie L, Wang L et. al

(STORM)

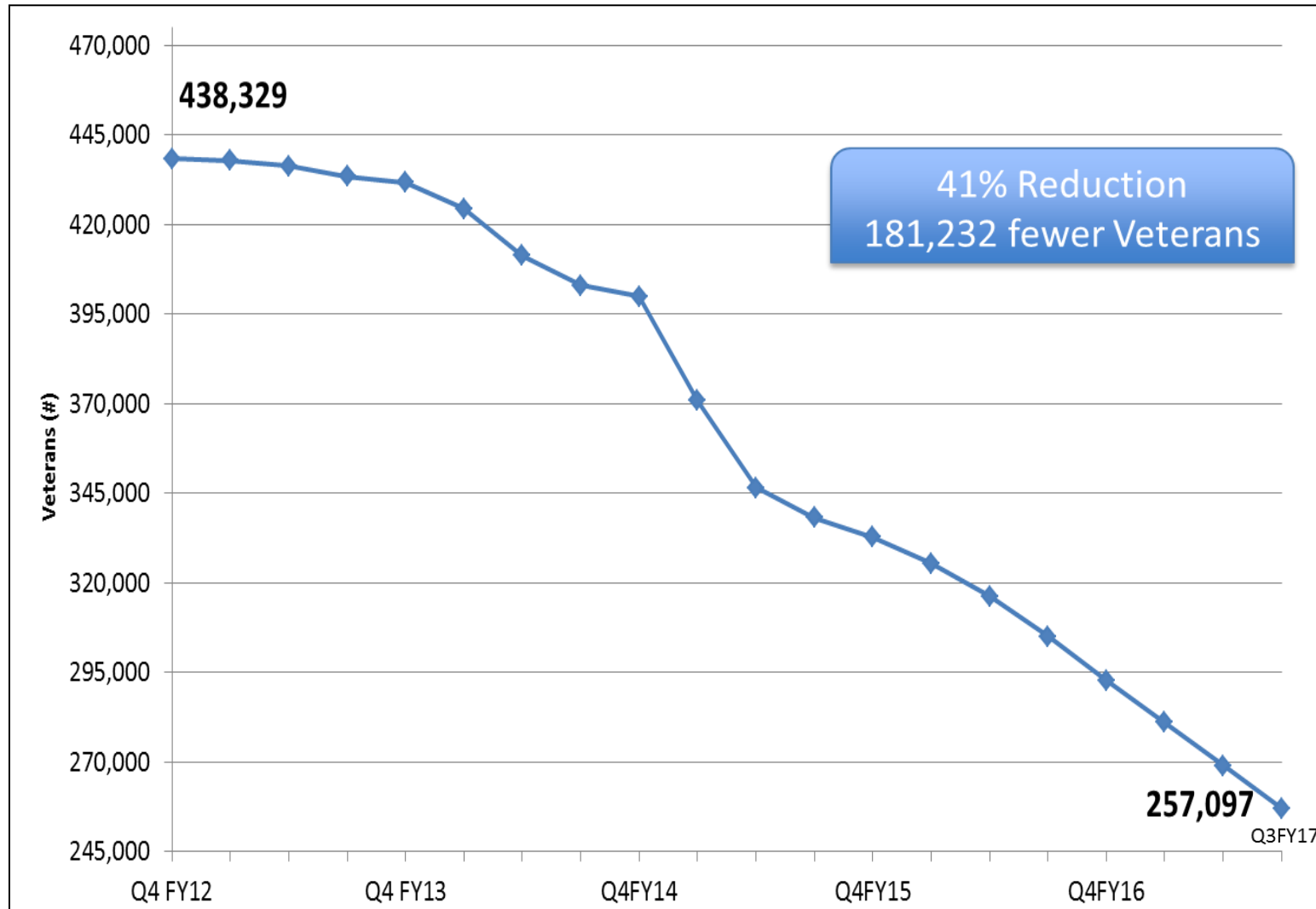
**Development and Applications of the Veterans Health Administration's
Stratification Tool for Opioid Risk Mitigation (STORM) to Improve
Opioid Safety and Prevent Overdose and Suicide**

The VA Opioid Safety Initiative (OSI)

- **Opioid Safety Initiative (OSI)** expanded nationally in FY 2013
- The OSI aims to **reduce over-reliance on opioid analgesics for pain management and to promote safe and effective use of opioid therapy when clinically indicated.**
- Comprehensive OSI strategy that includes **education of providers** and **expanded access to non-pharmacological treatment options**, in particular behavioral and complementary integrative health modalities.
- **OSI Dashboard** makes the totality of opioid use visible within VA and provides feedback to stakeholders at VA facilities regarding key parameters of opioid prescribing.

Veterans on Long-Term Opioid Therapy

Q4 FY2012 to Q3 FY2017



Patients on long-term opioid therapy defined as at least one opioid medication (excluding tramadol) dispensed in the selected quarter and a total cumulative day supply of opioid medications of ≥ 90 days in the last two quarters.

Veterans with Opioid and Benzodiazepine

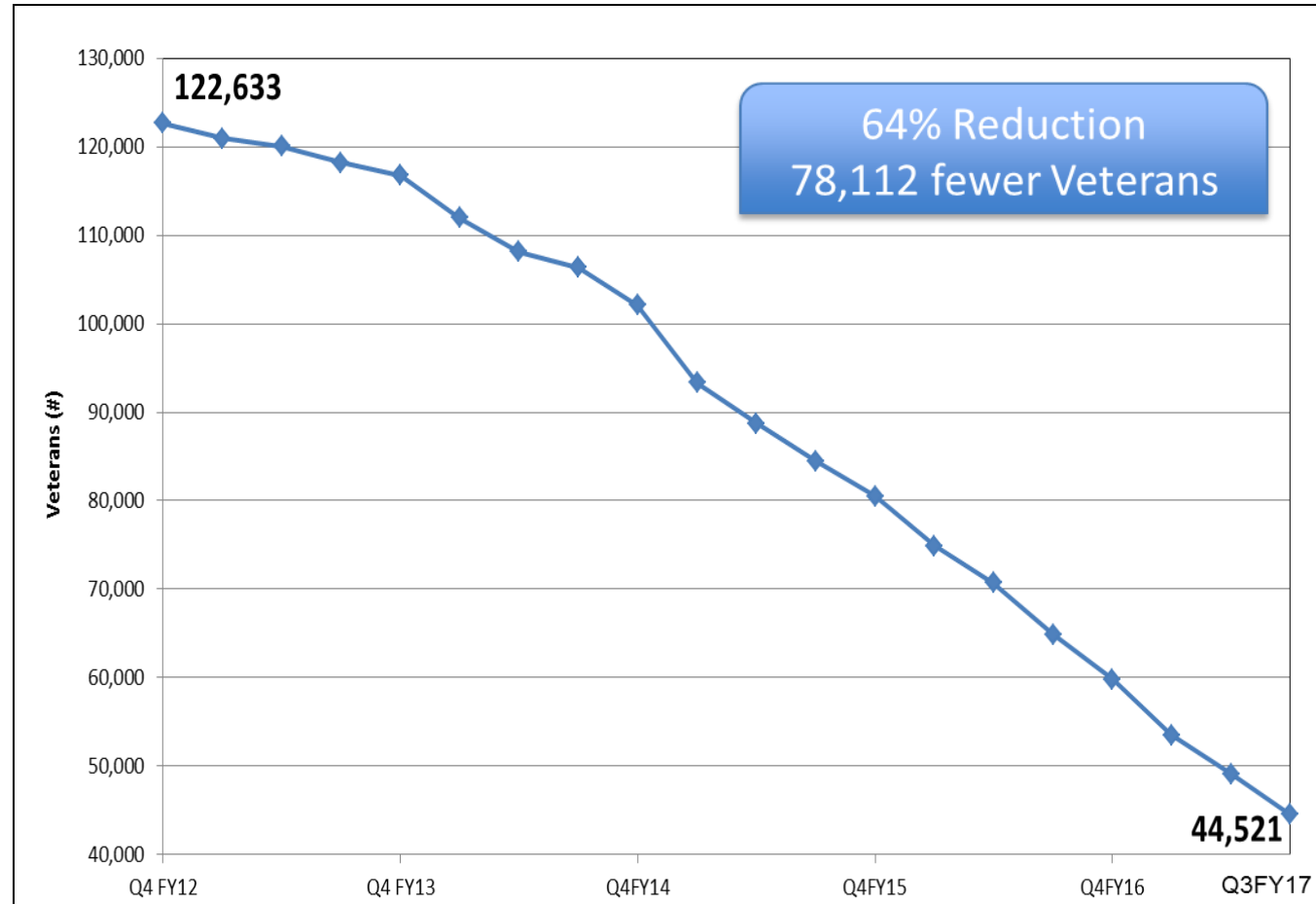
Q4 FY2012 to Q3 FY2017

Opioid patients
(includes
Tramadol)

13.9%



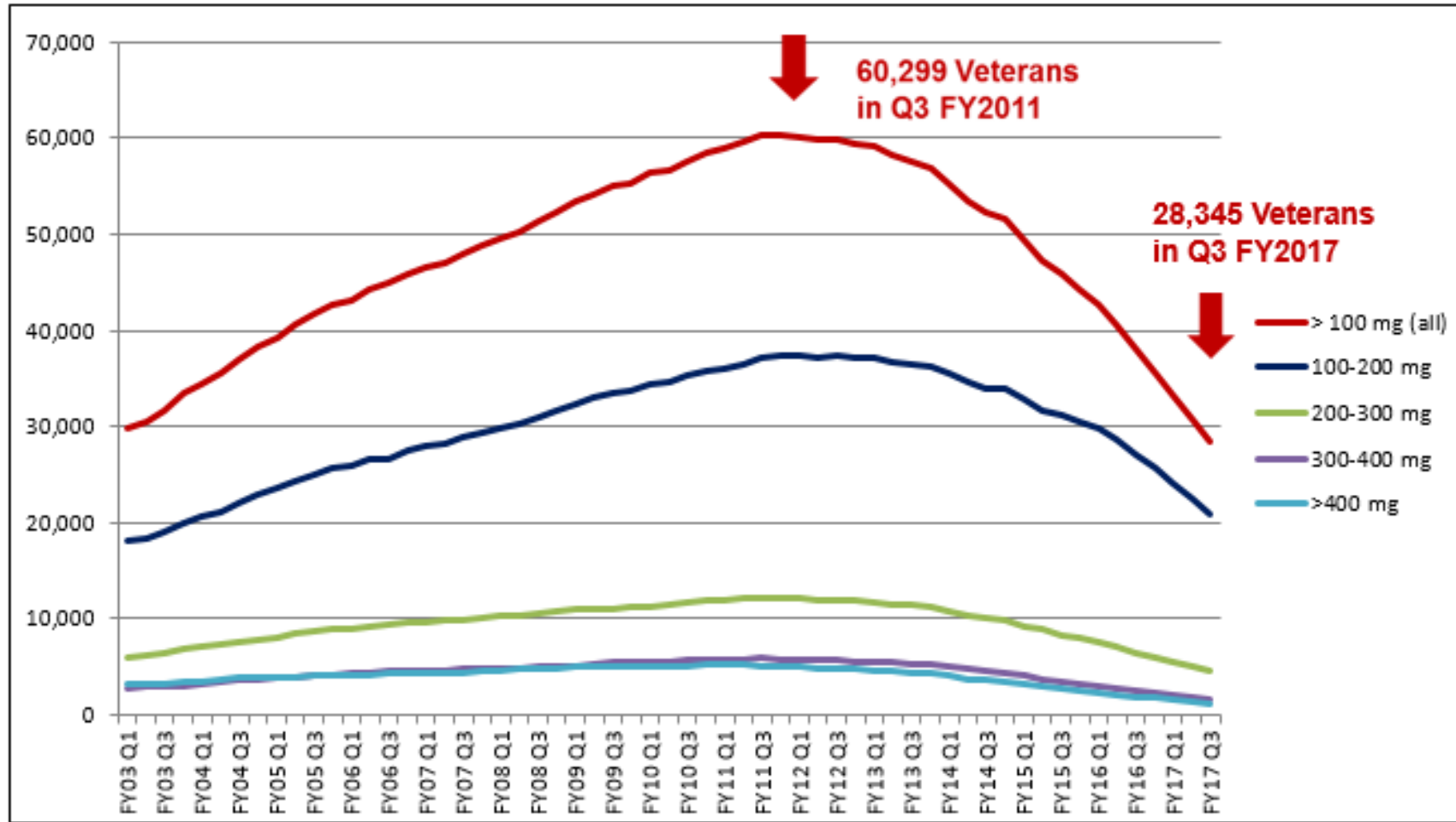
7.3%
of opioid
patients



High Dose Opioid Therapy

Q1 FY2003 to Q3 FY2017

Veterans



Q1 FY2003

Q3 FY2017