

# Taking the Pain out of Opioid Reduction Strategies: Experiences in Opioid Stewardship

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If these shadows remain unaltered by the Future,  
[more people] will die [due to opioid abuse].

(with apologies to)

–Charles Dickens, “A Christmas Carol”



# Regional One Health

Regional Medical Center: Located Downtown in Memphis, TN

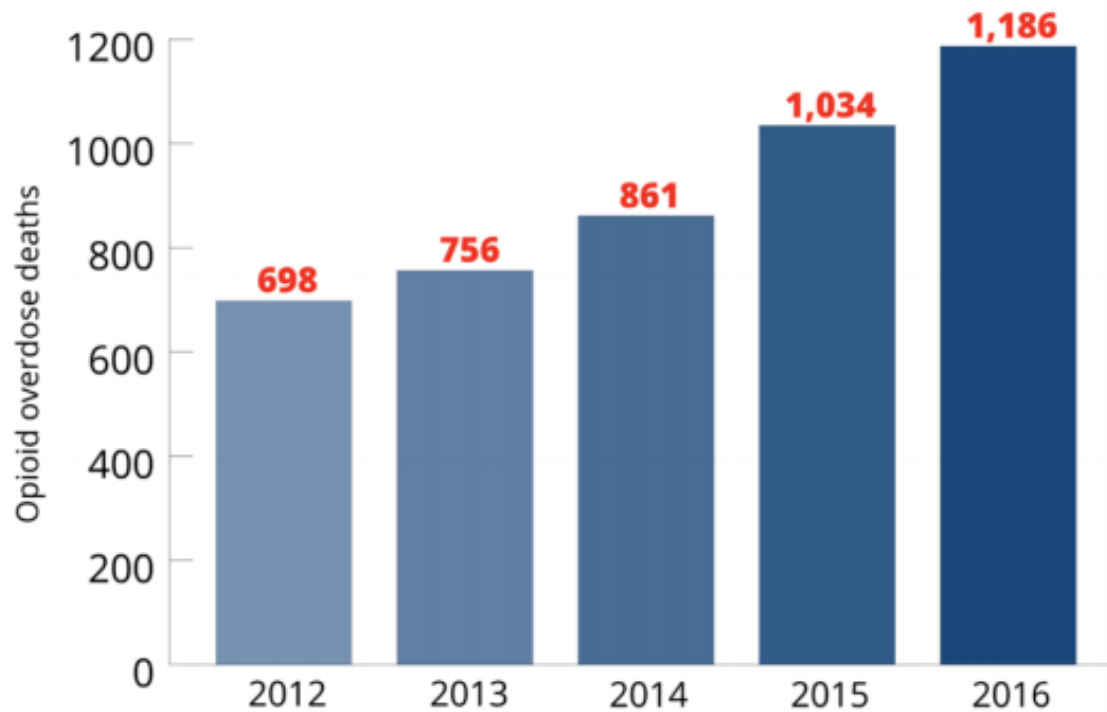
4 Emergency Departments: Medicine, Burn, Trauma, L&D

Level 1 Trauma Center serving patients in 150 mile radius

3<sup>rd</sup> busiest trauma center in U.S.

Variety of outpatient clinics: Sickle Cell, HIV, etc.

# Opioid Overdose Deaths in Tennessee



Source: Tennessee Department of Health

# Shelby County, TN

## Opioid overdose related Emergency Department visits

2014:	175
2017:	901
415 % increase over 4 years	

## Opioid related deaths

2013-2016:	474
2017:	174 (projected)
2018:	198 (projected)

Source: Shelby County Health Department

# Taking the Pain out of Opioid Reduction Strategies:

Determine your  
Departmental or  
Institutional Philosophy

# What is your philosophy about pain control and opioids?

- At ROH, based on the prevalence of opioid use/misuse in our community, we determined in 2016 that we would review our policies around opioids in the ED
- “First, Do No Harm”
- Put our patients’ long-term health above short-term pain relief or discomfort

# What is your philosophy about pain control and opioids?

- Compassion towards our patients' pain
- Not enablers of opioid addiction
- Avoid opioids in opioid naïve patients when other viable options are available
- Rooted in putting our patients' long-term health above short-term pain relief or discomfort



# What is involved in crafting philosophy?

- Utilize existing guidelines, policies/protocols, as well as the clinical experiences of your team
- Incorporate ethical and legal considerations
- Honest discussion
- Come to a consensus

# Who is involved in crafting a philosophy?

- Depends on the leaders in your department or institution
- Our ED leadership group, which includes pharmacist ED nurse manager, ED Medical director, and others.
- Our Opioid Stewardship Committee includes Representatives from each major department as well as Legal, Hospital Administration, etc.

# Use your Philosophy to Guide your Policy

# Taking the Pain out of Opioid Reduction Strategies:

## Create Policy

# What we have done at ROH: 2016

- Began a review of our processes surrounding opioids in the ED and prescriptions from the ED

- Adopted (most of) Tennessee College of Emergency Physician Emergency Department Opioid Prescribing Guidelines in ROH Medicine Emergency Department

# What we have done at ROH: 2017

- Take home naloxone (Narcan) kits in ED for patients who present with opioid overdose or are otherwise at high risk of overdose
- Sought and obtained P&T approval
- Accompanied by education on use for patient and/or family member as well as educational materials on a 6<sup>th</sup> grade reading level

# What we have done at ROH: 2018

- Increased data collection for opioid use in medicine and trauma EDs—both in the ED and prescriptions
- Set expectation for residents and attendings that opioid prescriptions should be limited to the 3 days except in extraordinary situations

# What we have done at ROH: 2018

## Opioid Stewardship Committee:

- Institution wide

- Chaired by President of Medical Staff



# Opioid Stewardship Committee

- Coordinates our opioid and pain management response as an institution
- Brings together physicians, nursing, pharmacy, legal,
- Meets new Joint Commission pain management requirements

# Taking the Pain out of Opioid Reduction Strategies:

## Craft a Coherent Message

You can [please] all the people some of the time, and some of the people all the time, but you cannot [please] all the people all the time.

(with apologies to) –Abraham Lincoln

# The Message:

-What is the “right” message?

Depends on:

- Institution specific factors
- Patient population
- External factors (state/federal law, Joint Commission, drug shortages, etc.)

# The Message

For the ROH Emergency Department, the message we decided to convey to patients and staff included the following:

# The Message

- We care about you (the patient). Our goal at ROH is to treat your medical conditions (including pain) safely and in the right way.
- We are trained to look treat emergencies, including pain. Our providers will use their best judgement when treating pain and follow all legal and ethical guidelines.
- The treatment of pain is complicated. Abuse of pain medications can cause serious health problems and death.

# The Message

- If prescriptions are needed for pain , we will give you a limited quantity of the pain medication with a lower risk of addiction and overdose whenever possible.
- We do not typically provide opioids for chronic pain.
- We do not refill lost or stolen prescriptions.
- Health care laws, including HIPAA, allow us to ask you for all of your medical records. These laws allow us to share information with other health care providers who are treating you.

# The Message

-Before prescribing an opioid or order controlled substance, we may check the Tennessee Controlled Substance Monitoring Database or a similar database that tracks your use of opioids and other controlled substance prescriptions

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# Taking the Pain out of Opioid Reduction Strategies:

## Communicate the Message Coherently

# Communicate:

- Patient should hear a consistent message from the time they walk in front door until the point they are discharged

# Communications: ED staff ← → ED staff: Get your story straight!

- Consistent message:
  - Providers
  - Nursing staff
  - Pharmacy
  - Hospital Administration

# Taking the Pain out of Opioid Reduction Strategies:

## Establish an Opioid Stewardship Committee

- Modeled on antibiotic stewardship committee
- Provides a means to craft an institution-wide philosophy around pain control
- Provides a means for crafting policy
- Provides a means for meeting new Joint Commission standards

# Continuing Challenges and Future Directions

# Challenges

- Sickle cell disease
- Severe trauma
- Severe burns
- Drug shortages

# Future Directions

- Increased focus on treatment options for patients already addicted to opioids
- Continue to find ways to prevent opioid abuse in the first place



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