

2017 EMS STATE OF THE SCIENCE: Gathering of Eagles XIX

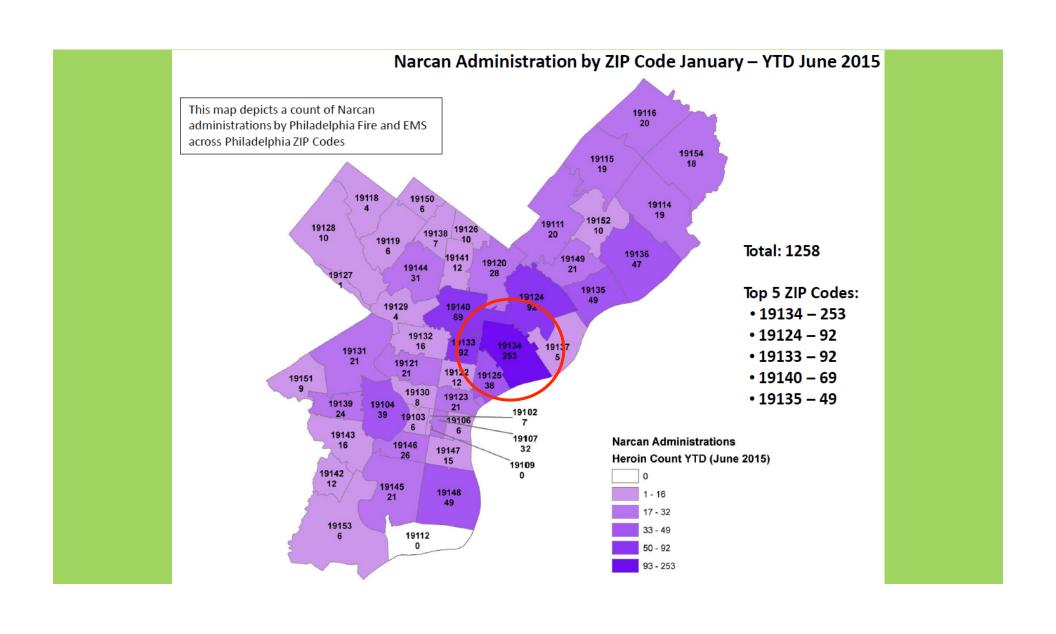


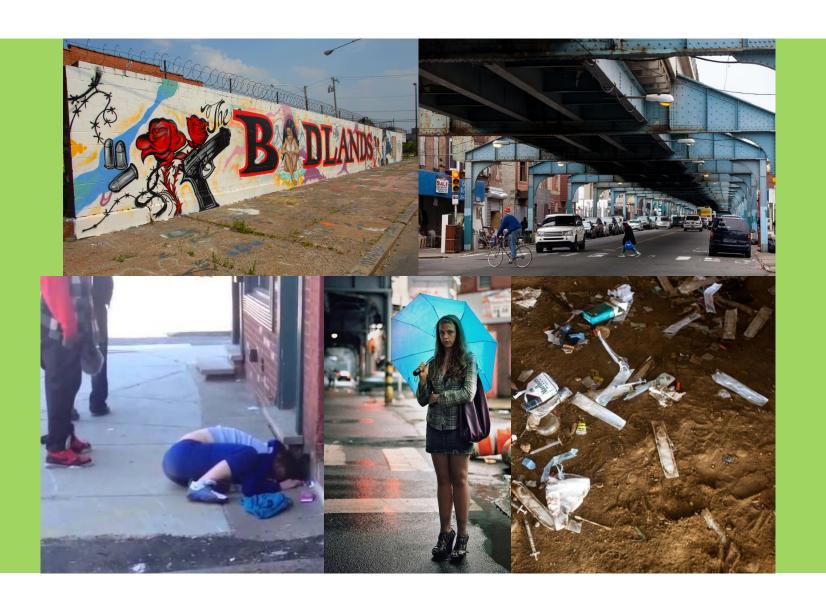
REACT-ing Well to Addiction and
Mental Health Challenges
Locating, Recruiting & Managing the Patient
with Opioid Addiction

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How Has PFD Responded to Rising Heroin Deaths?

- Philly's heroin OD deaths rising every year
- Increase naloxone inventory
- Put naloxone on all engines, ladders
- Collect daily naloxone use data by zip code
 - Use as surveillance tool
 - Bad batch of heroin, fentanyl, carfentanil
 - Share with other agencies





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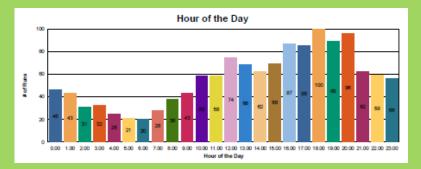


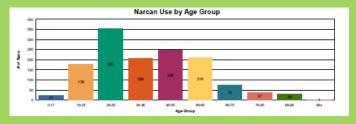
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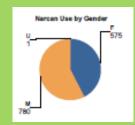
Associate Professor Ohio State University Wexner Medical Center

Tracking data on CFD Naloxone Use

- •Age
- •Gender
- •Race
- Impression
- Hour of Day
- Transport Status
- Destination Facility
- Day of week
- Day of Month
- •Zip code
- Multiple Narcan Uses







Opiate Surge Notification

• Each discipline has identified their critical indicator/trigger for initiating a conference call.

Fire/EMS departments -

Double the average of 8 in a 24 hour period, of EMS suspected opiate-related runs in the City of Columbus based on the discretion of the EMS Chief

Law enforcement departments -

Columbus Division of Police: A seizure of narcotics that, upon testing, reveals the presence of fentanyl, carfentanil, or another fentanyl analogue and there is reasonable suspicion that there may be a substantial amount in circulation.

Public health departments:

A validated increase of drug overdose visits (to ED/Urgent Care) data through EpiCenter.

Medical/hospitals:

- ○An increase in the number of patients presenting to the ED either over a 24 hour time frame or in a short period of time;
- oA higher than normal amount of doses of Narcan/naloxone are being given;
- Patients with a diagnosis of opioid overdose are presenting with symptoms that are at a higher level of acuity and require more definitive treatment than usual.

If the critical indicator/trigger point has been reached, the Initiating Agency will call the Columbus Fire Alarm Office (CFAO) to schedule a conference call to discuss opiate overdose surge activity.

Recovery Outreach



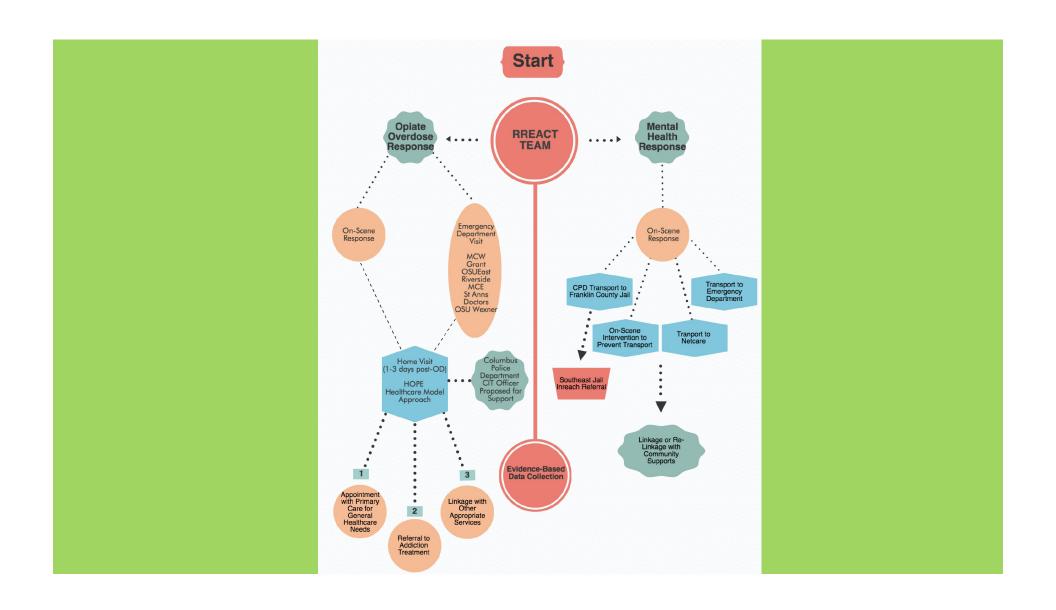
RREACT Program

Rapid Response Emergency Addiction and Crisis Team

- 12 hours/day-7 days a week
- Mental health nurse
- Social worker
- •In addition, there will be an EMS supervisor and paramedic crews from the Columbus Fire Department.

In response to opiate overdose, the RREACT team will be requested by EMS/Dispatch communication center for response to the receiving ED or on-scene location (if patient refuses transport). This initial outreach effort will be to assess the patient's current use and immediate service needs; facilitate engagement and build rapport; and collect demographic information for future follow-up. Family supports will be provided as needed to include Project Dawn kits, counseling and support groups, and other appropriate referrals.

In response to mental health crisis response, the RREACT team may be requested by EMS/Dispatch communication center for on-scene response. The team will provide support to paramedics; assess for lethality if necessary; offer brief crisis intervention; and collect information on current linkage to services and facilitate re-linkage if appropriate.



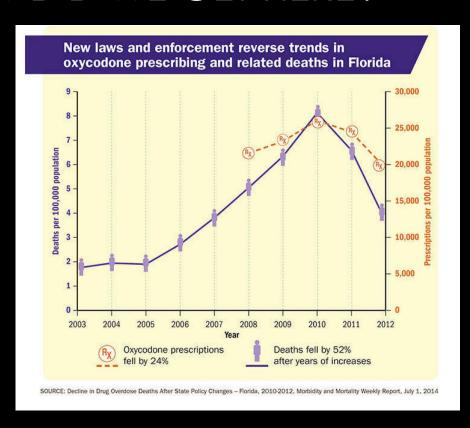




- What is the current system for treating narcotic overdose?
- Is there something we can do to keep our patients from repeat overdose?
- How do we prevent the revolving door of narcotic overdose?

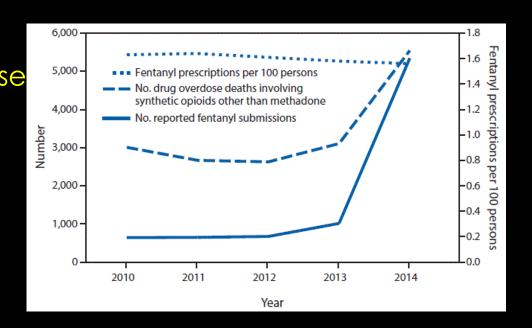
HOW DID WE GET HERE?

- 2010 Florida is the "Pill Mill Capital" of the USA
- 650 Million Oxycontin Tablets shipped to Florida
- Then Law Enforcement efforts, "Pain Clinics" shut, Doctors sent to prison for knowingly being a part of the drug trafficking trade
- 52% Drop in Oxycontin Death rate 2010 -2012



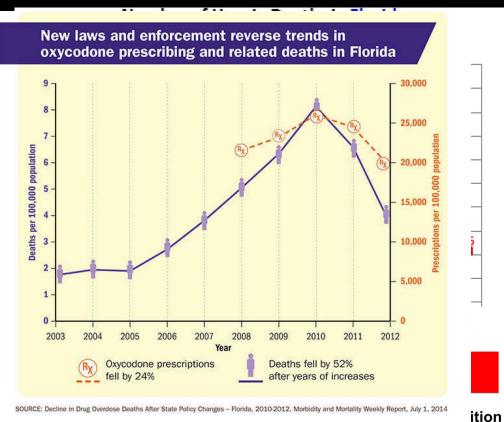
WITH OXYCONTIN GONE, OUR OLD NEMESIS HEROIN MAKES A COMEBACK, BUT THIS TIME ITS NOT ALONE...

426% increase in Fentanyl related overdose in 2013

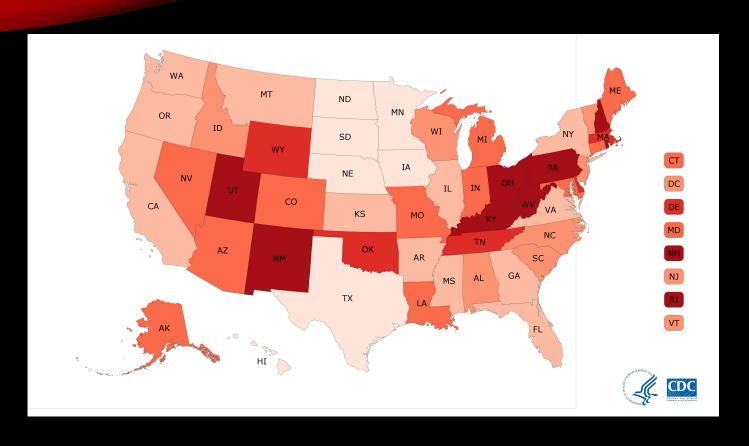


CLOSING THE PILL MILLS IN FLORIDA IS GOOD NEWS,... RIGHT???

1800% Increase in Narcotic Death Rate 2012 – 2015. So far 2016 is double again or 3600% increase in death rate since 2012



IS THIS A NATIONAL PROBLEM?



THE NEXT EPIDEMIC...



25 Million Substance Users in USA

4 Million Addicted

PBC Data: 2/3 have Hep C

HIV Rates Rising Rapidly

HOW DO WE CURRENTLY DEAL WITH OVERDOSE PATIENTS?

- Palm Beach County EMS Spent about \$500,000.00 on Narcan in 2016
- Narcan is over the counter drug now
- Police have Narcan
- Addicts and their friends and family have Narcan
- But the death rate keeps rising.....

THE REVOLVING DOOR



HOW DO WE CURRENTLY TREAT OPIATE ADDICTS?



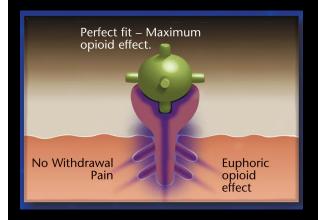
HOW SHOULD WE

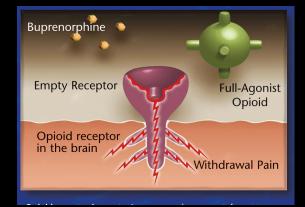
HOPE ON THE HORIZON

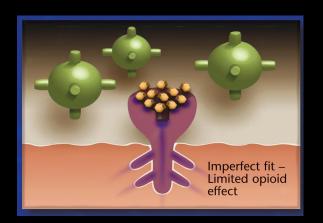
- DATA Passed 2000 Allows for treatment outside of federal drug centers (methadone clinic)
- Buprenorphine approved by DEA for MAT of withdrawal



MAT MODEL



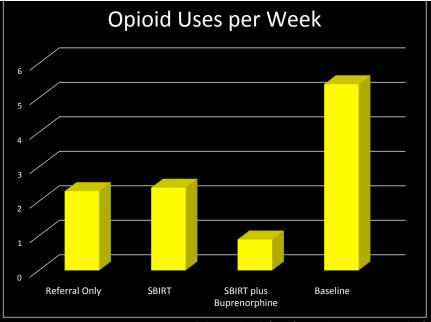


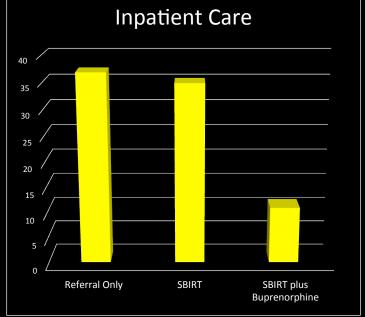


Original Investigation

Emergency Department-Initiated Buprenorphine/Naloxone Treatment for Opioid Dependence A Randomized Clinical Trial

Gail D'Onofrio, MD, MS; Patrick G. O'Connor, MD, MPH; Michael V. Pantalon, PhD; Marek C. Chawarski, PhD; Susan H. Busch, PhD; Patricia H. Owens, MS; Steven L. Bernstein, MD; David A. Fiellin, MD



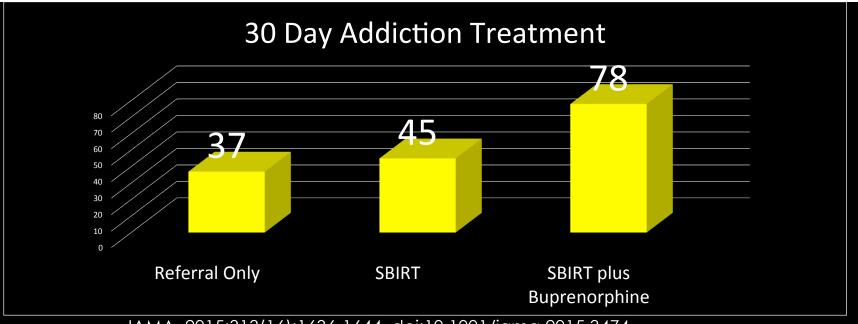


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BARRIERS TO CARE

- Lack of insurance/financial resources
- Lack of transportation
- Lack of program space
- Pain/fear of withdrawal
- Lack of positive support structure

PALM BEACH COUNTY MAT PILOT PROGRAM



RESOURCES FOR MORE INFORMATION

https://www.naabt.org/education/literature.cfm

http://www.samhsa.gov/



QUESTIONS?



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