

Overuse of Opioids for Chronic Pain in Primary Care

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TAKING ACTION
ON OVERUSE

Overused Service & Rationale

- When prescribing long-term opioid therapy for chronic pain, the **potential for harm often outweighs the potential for benefit.**
- Erie County has a **high rate of opioid overdose and death**, and many of our clinics do not have a consistent and safe approach to managing long-term opioid therapy in our patient population.



Setting

Hertel Elmwood Primary Care Internal Medicine Center.

5 general internists

1 family physician

1 nurse practitioner

32 internal medicine residents

110 on Long-term opioid therapy

Patients are predominantly uninsured or on Medicaid.



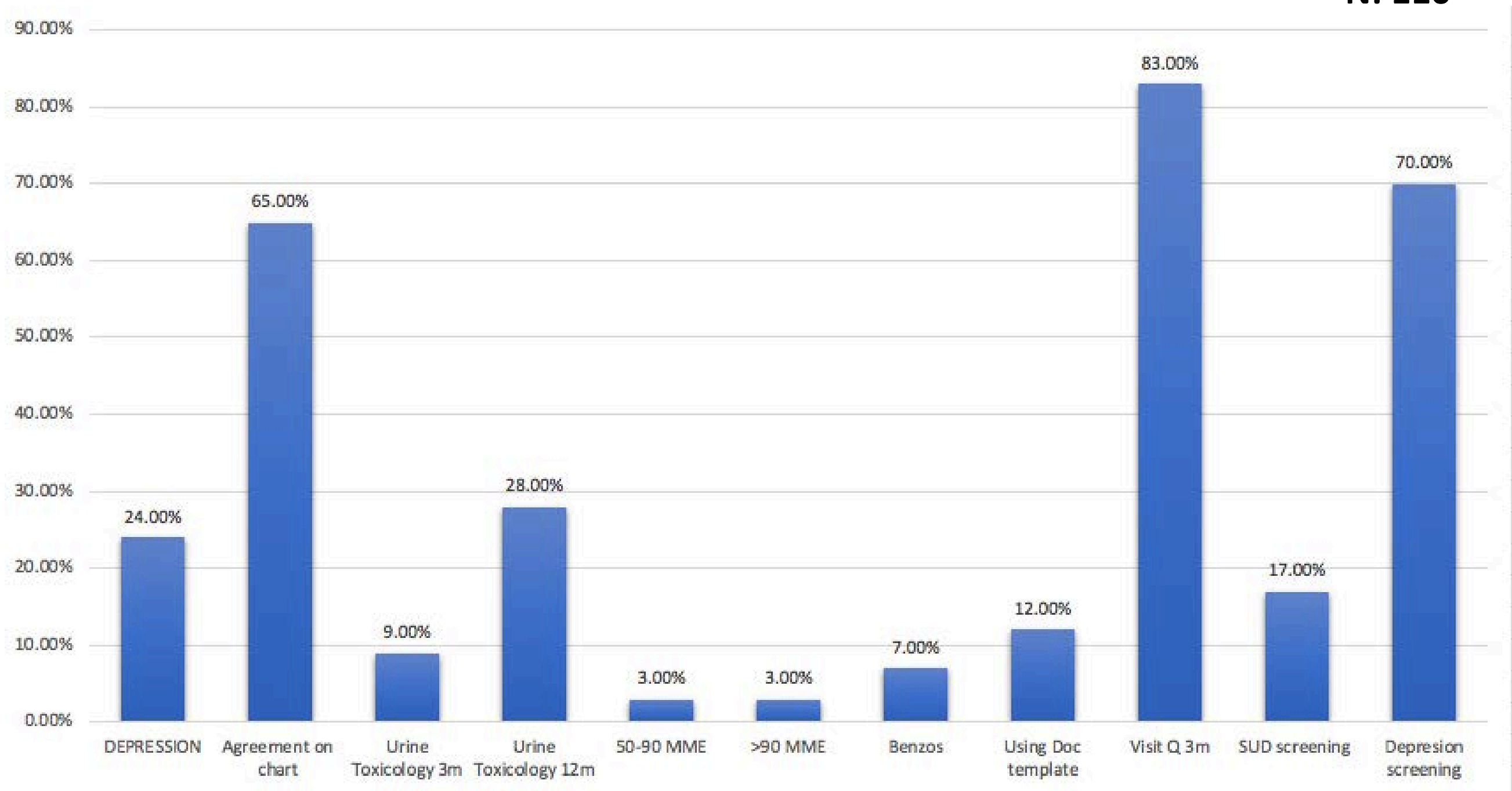
Early Critical Steps

- **Leadership engagement/set up an improvement team/** to gather and review baseline encounter characteristics, engage clinical/clerical staff and redesign the long-term opioid therapy encounter.
- **Baseline Data Assessment** (next slide) helped to prioritize key aspects of the long-term encounter.
- **Re-design a standardized chronic pain encounter** with workflows for front desk staff, nurses, medical assistants and clinicians, and with screening tools incorporated into each workflow.

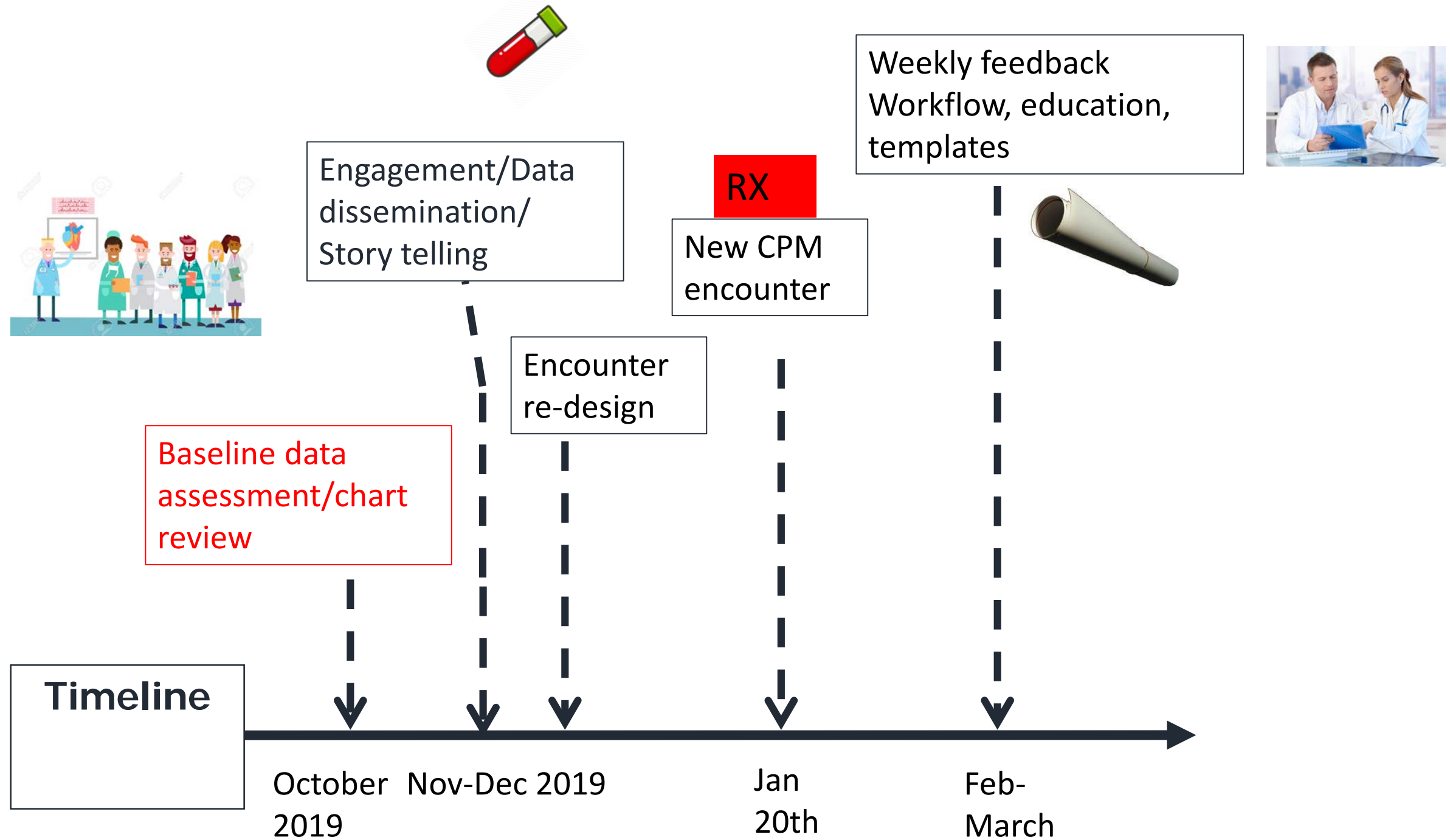


Long-Term Opioid Therapy patient encounter characteristics in a Primary Care Center. Buffalo, NY. October 2019.

N: 110



Timeline of Interventions





Six Building Blocks

A Team-Based Approach to Improving Opioid Management in Primary Care

TURN
THE
TIDE



PRESCRIBING OPIOIDS FOR CHRONIC PAIN

ADAPTED FROM CDC GUIDELINE

Opioids can provide short-term benefits for moderate to severe pain. Scientific evidence is lacking for the benefits to treat chronic pain.

IN GENERAL, DO NOT PRESCRIBE OPIOIDS AS THE FIRST-LINE TREATMENT FOR CHRONIC PAIN (for adults 18+ with chronic pain > 3 months excluding active cancer, palliative, or end-of-life care).

BEFORE PRESCRIBING

How to use Narcan® Nasal Spray for an opioid overdose



KNOW THE SIGNS OF OVERDOSE

- Person is passed out and you cannot wake them up.
- Breathing very slow, making gurgling sounds, or not breathing at all.
- Lips are blue or grayish color.



CHECK FOR A RESPONSE

- Shake them and shout to wake them up.
- If no response, grind your knuckles into their chest bone for 5-10 seconds.
- If the person still does not respond, call 911.



CALL 911

- Tell the 911 dispatcher, *"I think someone has overdosed!"*
- If you report an overdose, you and the overdosed person have significant protections under the New York State Law from being charged with drug possession, even if you shared drugs.

Chronic Pain Management Visit (60 min.)

Patient Arrival and Check-in (5 min.)

MA/Nurse Task
Pre-Visit Patient Chart Assessment (5 minutes)



Triage (15 min.)

MA/Nurse Task	Provider Task
Triage and Screenings (15 min.)	Pre-Visit Chart Review



Provider Visit (30 min.)

MA/Nurse Task	Provider Task
Obtain Patient Education Materials and urine Toxicology Cup	Patient History and Physical Exam (10 min.) Medication Discussion (10 min.) Create a Chronic Pain Care Plan (5 min.) Narcan Discussion (5 min.)



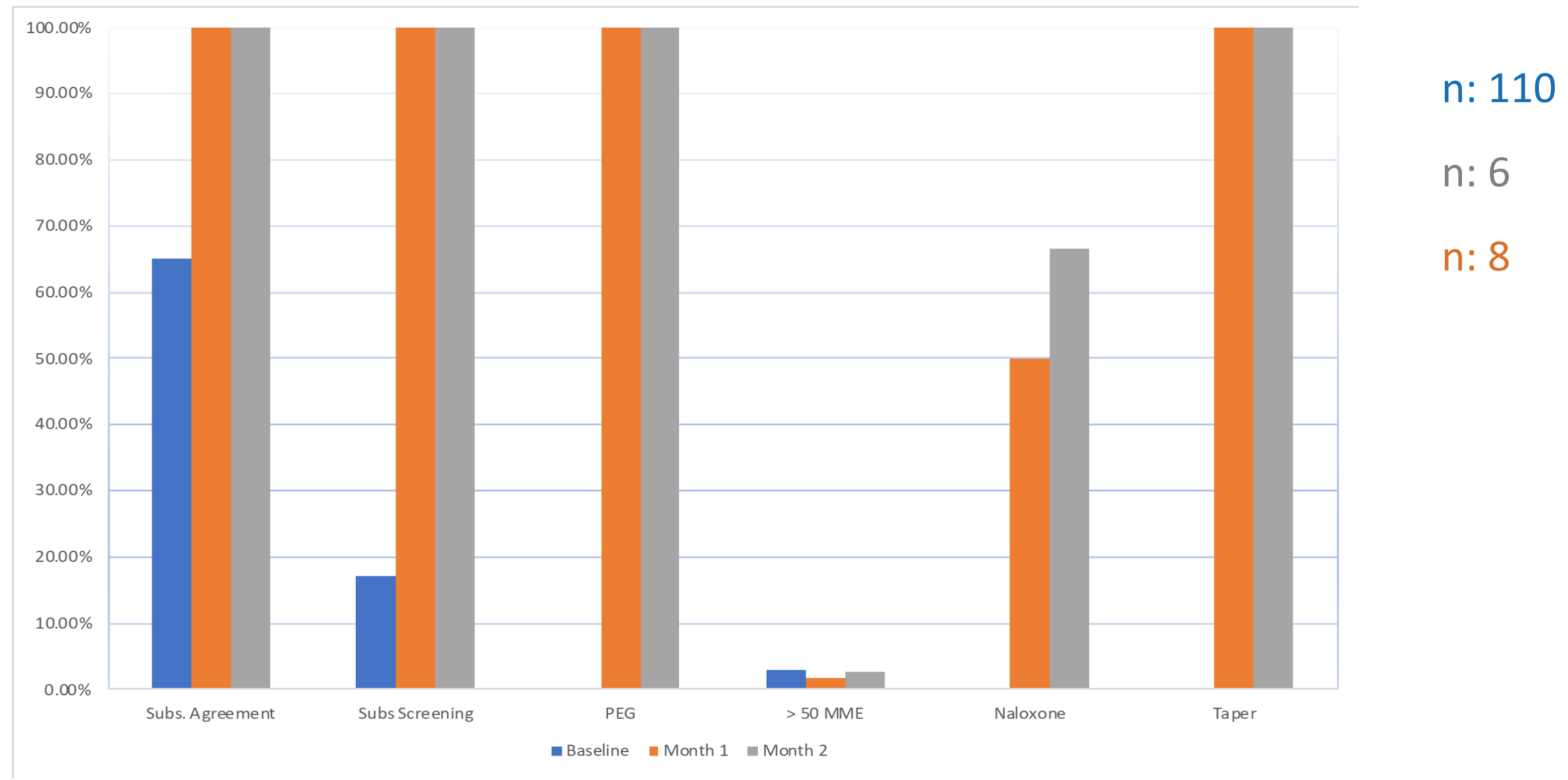
MA/Nurse Visit (15 min)

MA/Nurse Task	Provider Task
Urine Toxicology Screen Narcan Training Patient Education	Write Narcan Prescription



Schedule Follow-up and Discharge

Long-Term Opioid Therapy 8 weeks post intervention in a Primary Care Center. Buffalo, NY. March 2020.



Key Lessons Learned

- **Listen to patient and clinician stories** about chronic pain experiences.
- **Chart review** to learn the untold story from administrative data
- **Engage your team/practice early.**
- **Use evidence** to guide your intervention strategy.

Next Steps

- Sustainability plan, write study protocol, statistical analysis, register study
- Analyze data from control practices, Implement in other practices

