

Improving Health Outcomes: Improving Opioid Safety in Older Adults

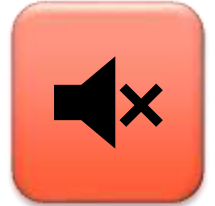


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Michael Crooks, PharmD.
Clinical Consultant, Opioid Safety

Ground Rules

- All lines are muted, so please ask your questions in chat
- Be present and actively participate



- Use the Chat feature to share:
What are you most interested to learn about reducing opioid-related harm in your community?

Michael Crooks, PharmD.

CLINICAL CONSULTANT - OPIOID SAFETY

6 Years as Medication Safety Technical Adviser with Alliant Quality (Medicare Quality Improvement Org.)

Focus on Opioid Safety, Adverse Drug Event Prevention and technical assistance to pharmacies, practices and facilities to implement medication safety improvement initiatives

Background in Community and Independent Pharmacy

Contact: Stacy Hull, Behavioral Health and Opioid Safety Lead, Alliant Quality
Stacy.Hull@AlliantHealth.org



Making Health Care Better *Together*



Discussion Objectives

- Summarize opioid use and harm data for older adults in America
- Describe the appropriate use of opioids in older adults and special risk considerations
- Discuss strategies to reduce opioid risk

The Opioid Crisis

Opioid Overprescribing



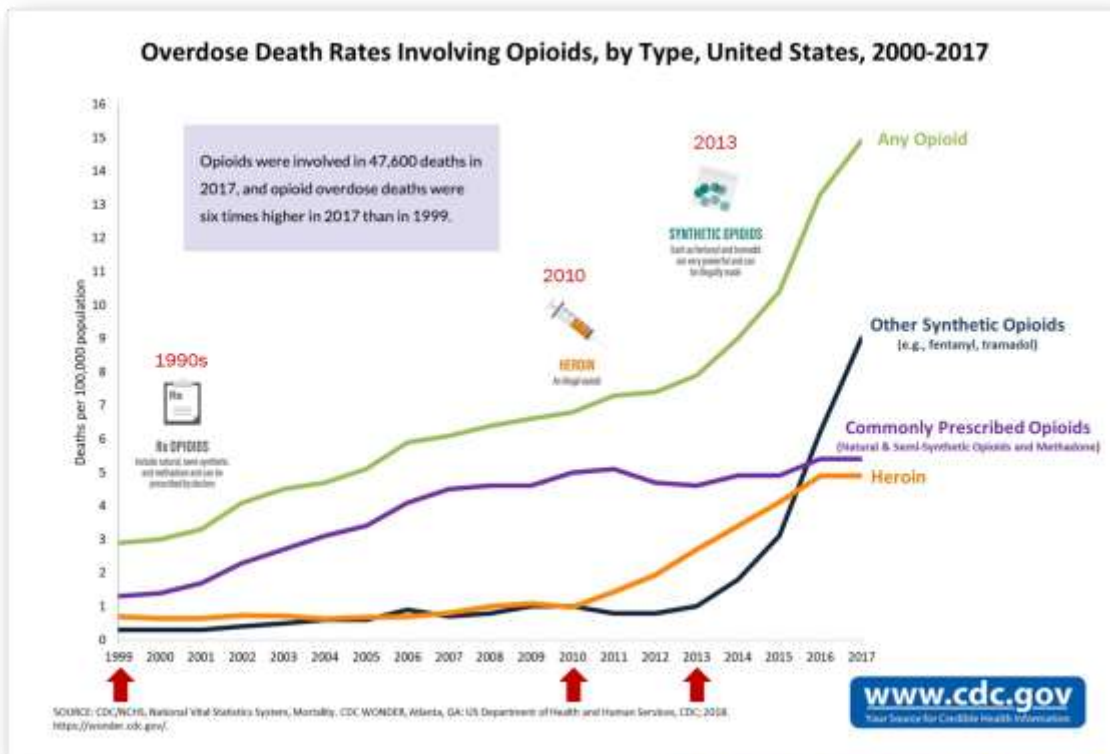
Opioid Abuse, Diversion
and addiction



Shift to Heroin and Illicit
Fentanyl

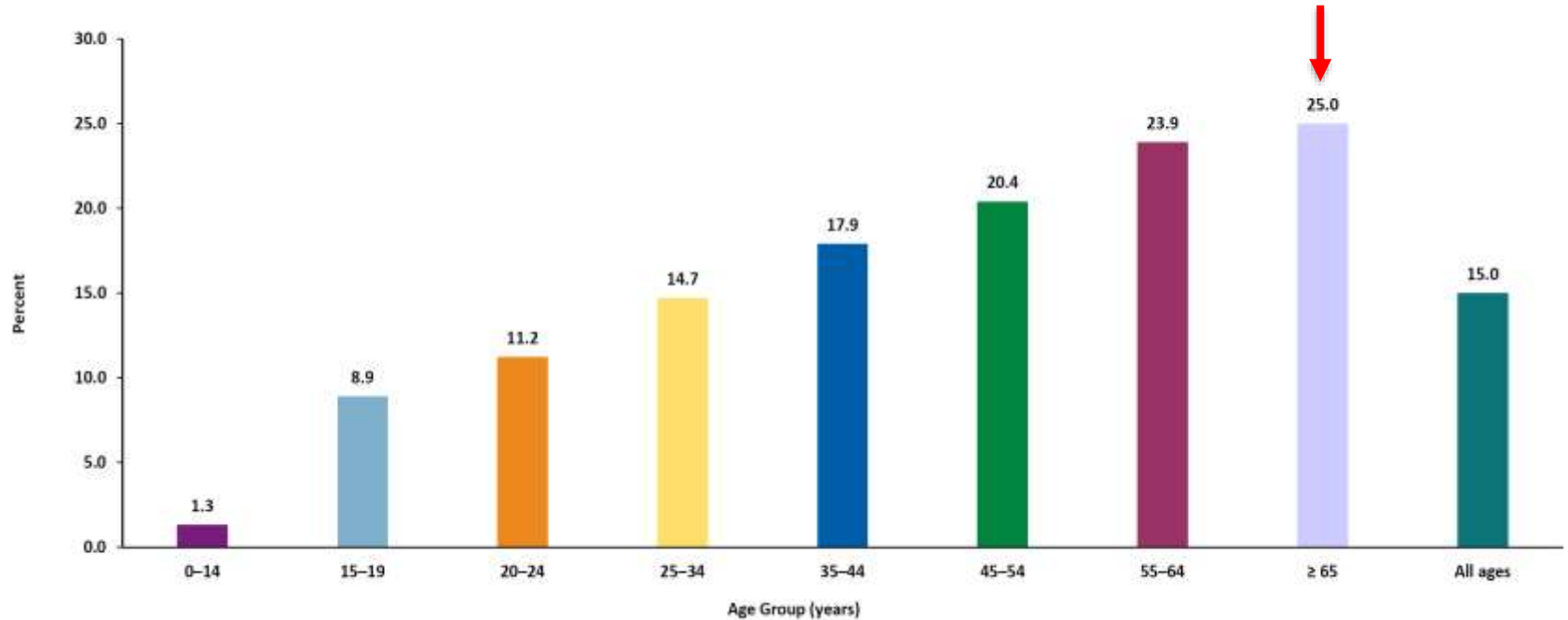


Increase in Opioid Deaths

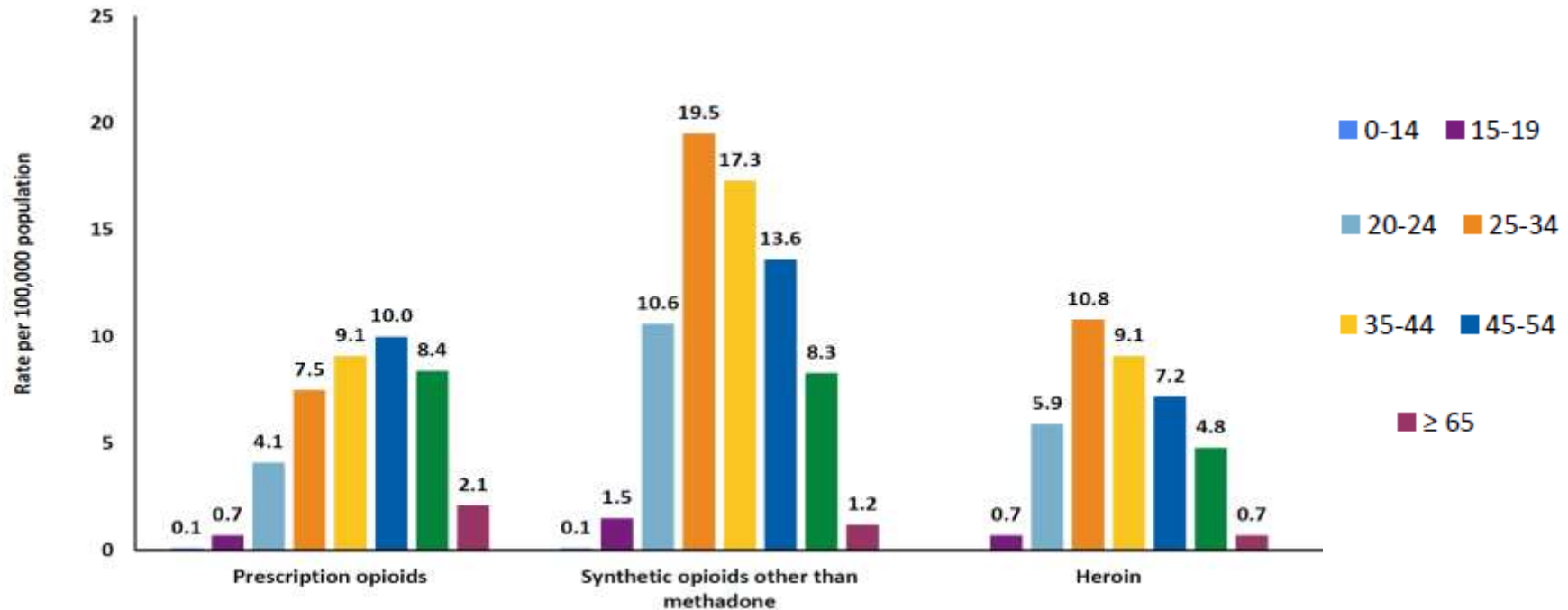


<https://www.cdc.gov/drugoverdose/data/analysis.html>

Percentage of persons who had at least one prescription filled for an opioid, by age group — United States, 2018

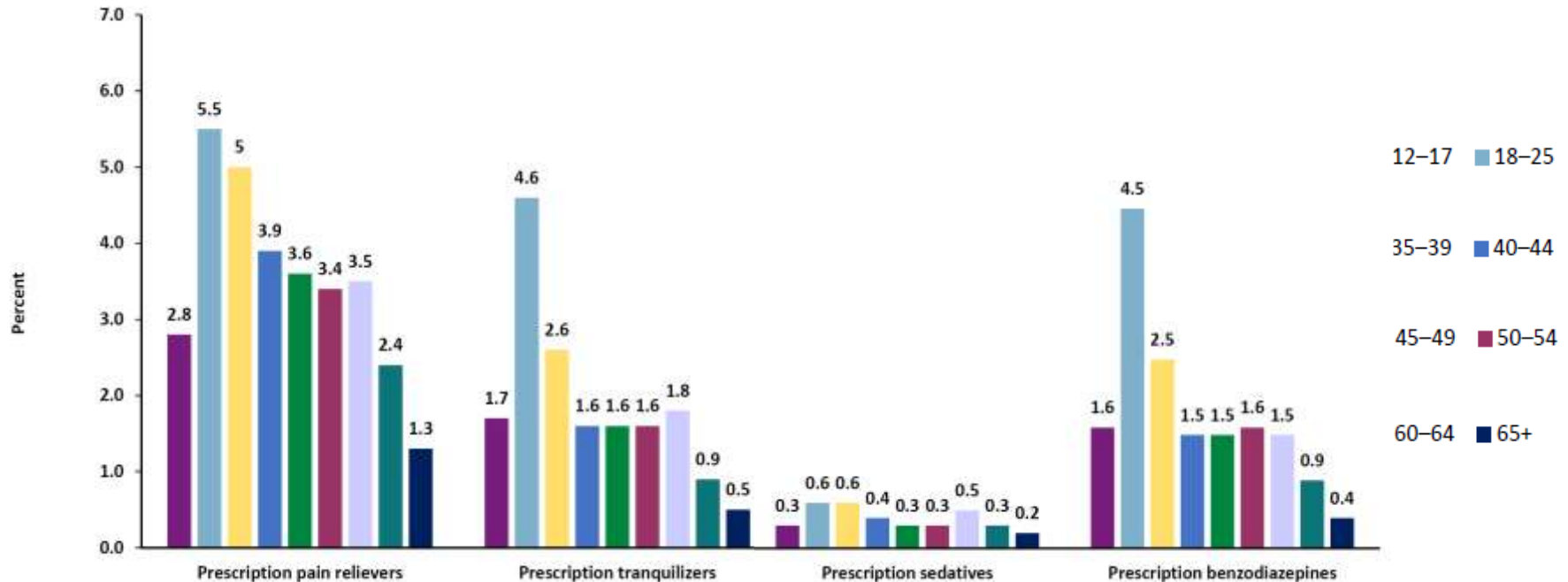


Age-adjusted rates per 100,000 population of drug overdose deaths by drug or drug class and age group — United States, 2017



<https://www.cdc.gov/drugoverdose/pdf/pubs/2019-cdc-drug-surveillance-report.pdf>

Self-reported prevalence of prescription drug misuse in the past year by age group, persons 12+ years old — United States, 2018



Opioids for Older Adults: What's is the risk?

- Opioids can be appropriate and used safely
- Older adults have some special risks:
 - More chronic diseases or complex health issues
 - More medications used
 - More sensitivity to medication effects
 - More risk of serious harm when an adverse effect does occur

Opioids for Older Adults: Focus on Safer Prescribing

- Discuss pain management goals and risks
- Use lower, safer doses of opioids
- Avoid drug and health condition interactions that increase risk
- Provide naloxone when higher risk opioid therapies are necessary
- Educate on safe storage and disposal

Pain Management Goals and Opioid Risks

- How much pain or relief should I expect?
- When will I be able to...
 - Get up and move
 - Get back work/hobby/activity
 - Restore sleep, range of motion, daily activities
- What should I look out for as a side-effect?

Significant risks of opioid in older adults

- Overexposure leading to respiratory depression
- Decline in cognition, mental status
- Increased risk of falls with injury
- Constipation with complications

Use Lower, Safer Doses of Opioids

- Is this the only medicine I should use to treat my pain? Is this the safest effective dose?
 - Opioids aren't a first-line choice
 - Use only the lowest effective dose for the shortest time
- Watch out for long-acting or extended-release (XR, ER, CR, LA, patches)

Stepwise Pain Management

Step 1 MILD Pain

Step 2 MILD Pain

- Nonopioids (acetaminophen, NSAIDs)
- \pm Adjuvants

Step 3 MODERATE Pain

- Low doses of opioids or 'mild' opioids (e.g., tramadol)

- Nonopioids (acetaminophen, NSAIDs)
- \pm Adjuvants

Step 4 SEVERE Pain

- Higher doses of opioids, more potent opioids

- Low doses of opioids or 'mild' opioids (e.g., tramadol)

- Nonopioids (acetaminophen, NSAIDs)
- + Adjuvants

Non-pharmacologic therapy

Avoid drug/disease interactions that increase risk:

- Could this medicine cause problems with other conditions or anything else that I take?
- Biggest medication safety concerns are:
 - Medicines for sleep ('z'-drugs, diphenhydramine)
 - Anti-anxiety (benzodiazepines)
 - Muscle-relaxers
- Biggest disease/chronic conditions concerns:
 - Breathing disorders: COPD, Sleep Apnea
 - Fall Risks: previous falls, balance/gait problem, osteoporosis

Consider naloxone when higher risk opioid therapies are necessary

- Is there something I should do if I have a reaction to this medicine?
- Naloxone is the opioid reversal drug
 - Prescribers should co-prescribe naloxone for higher-risk opioid therapies
 - Georgia Law allows pharmacists to dispense naloxone without a personal prescription

Learn more about naloxone at
www.OpioidOverdoseRescue.com

STEP ONE



Give
Naloxone

STEP TWO



CALL
911

STEP THREE



First
Aid

Educate on safe storage and disposal

- How can I keep others in my house safe?
- Store medicines where others can't get to them (consider a locked cabinet or med safe)
- Dispose of unused medicines
 - Can use the trash for personal disposal
 - Better: Find a local disposal site or personal disposal solution

Where can you find medication disposal dropbox sites in Georgia?



View the interactive map on the Georgia Prescription Drug Abuse Prevention Initiative website:

<https://stoprxabuseinga.org/prescription-drug-disposal/>

Want more on opioid safety in older adults?



APPROPRIATE USE

Always follow safe medication use tips:

- Do not share your opioids or other medications with anyone.
- Do not take someone else's prescription medication.
- Store your prescription opioids and other medications securely.
- Safely dispose of expired, unused, or unwanted prescription medications.



View the Georgia Attorney General's opioid safety information website:

<https://doseofrealityga.org/>

Want more on opioid safety in older adults?



View the Medical Association of Georgia's Top Docs Radio series:

<https://www.facebook.com/MAG1849/videos/2122799347980849/>

Adrienne Mims, M.D., and Mike Crooks

 Medical Association of Georgia (MAG)

Share

10 Shares

A network diagram consisting of numerous red lines connecting various nodes. The nodes are arranged in a circular pattern, forming a heart shape in the center. The lines radiate outwards from this central heart, creating a complex web of connections. The background is white, and the lines are a vibrant red color. The overall image conveys a sense of interconnectedness and focus on a central point.

Bringing it Home

Making Health Care Better Together

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