

June 7, 2016

ENDING THE OPIOID EPIDEMIC: NEW PATIENT EDUCATION TOOL AND OTHER RESOURCES FOR HOSPITALS

AT A GLANCE

At Issue:

Every day, hospitals see the devastating effects of the U.S. opioid epidemic. While prescription opioids can be a safe and necessary part of pain management, these drugs also carry serious risks of harm because of the potential for addiction, misuse, overdose and death. Centers for Disease Control and Prevention (CDC) statistics indicate that more than 14,000 people died from overdoses involving prescription opioids in 2014. More than 1,000 people are treated in emergency departments each day for misusing prescription opioids, according to government sources.

Across the country, hospitals are working to reduce the epidemic, employing a multitude of strategies to fight this multifaceted and serious public health problem. **To assist these efforts, the AHA and CDC have created a new [patient education resource about prescription opioids](#).** Developed with input from CDC subject matter experts, as well as hospital clinical and behavioral health leaders, this two-page document outlines evidence-based information about the risks and side effects of opioids. It was designed to help facilitate discussions between health care providers and patients about these risks, as well as alternatives to opioids. In addition, the resource includes messages about how to store opioids and dispose of unused medications.

The AHA also encourages hospitals and medical staffs to review their policies and procedures to ensure opioids are handled properly throughout their organizations. As described on the following pages, hospitals play several important roles in addressing the epidemic.

Our Take:

The AHA is dedicated to supporting its members as they work within their organizations and across their communities to reduce opioid addiction, overdose and death. This advisory provides ideas for using this new patient education tool and highlights other resources from the AHA to address the opioid epidemic, available on the AHA's website at www.aha.org/opioidepidemic.

Further Questions:

For further questions, or to share your organization's ideas and actions, please contact Evelyn Knolle, senior associate director of policy, at eknolle@aha.org or (202) 626-2963.

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BACKGROUND: HOSPITALS FIGHTING THE OPIOID EPIDEMIC

Every day, hospitals see the devastation caused by addiction, overdose and death related to opioids, and they are employing a multitude of strategies to fight this multifaceted and serious public health problem. During the fall 2015 round of governance meetings, AHA members discussed the effect of the epidemic on their communities, as well as several important roles that hospitals play in fighting it, such as:

- ensuring clinician education about and oversight of appropriate prescribing practices, which includes patient education;
- offering treatment/referrals for patients with substance use disorder;
- ensuring that patients treated for substance use disorder are properly discharged;
- handling individuals with drug-seeking behavior in the emergency department (ED) appropriately, which includes the use of prescription drug monitoring programs;
- reviewing opioid alternatives to pain management; and
- safeguarding prescription opioids against diversion.

The AHA encourages hospitals and medical staffs to review their policies and procedures to ensure that opioids are handled properly and that patients are neither undertreated for pain nor overprescribed prescription pain medication. This includes a review of policies concerning the roles outlined above, as well as the monitoring of post-operative patients for over-sedation and respiratory depression related to IV opioids. In addition, AHA members have expressed clear consensus that hospitals cannot solve this problem alone. Hospitals must work with their communities and collaborate with other organizations such as law enforcement, schools, primary care providers and others.

AVAILABLE RESOURCES

The AHA encourages hospitals to use the attached [patient education resource](#) from the AHA and Centers for Disease Control and Prevention (CDC) and consider the ways that the document and its content can be used as a tool to promote a better understanding about these powerful drugs.

Hospitals told the AHA that patient education is an important component to successfully ending the epidemic. Therefore, the AHA collaborated with the CDC to develop a patient education resource outlining the risks and side effects of opioids. The AHA previously provided feedback to the CDC on its voluntary opioid [prescribing guidelines](#) for non-cancer related chronic pain. The CDC has issued guideline [information](#) and [resources](#) for health care providers, which also provide some background information on the patient resource.

The AHA is committed to assisting hospitals and health systems as they battle the epidemic, including [advocating for legislation](#) in Congress that supports provider and community efforts; disseminating the new opioid prescribing guidelines from the CDC; supporting policy changes such as a [reassessment](#) of HCAHPS survey questions related to pain management; and sharing member practices about ED protocols, pain management and community collaboration (see below for more details about recent AHA education efforts).

Patient Education Resource

We encourage hospitals and medical staffs to consider using this patient education resource:

- As a tool to aid in conversations with patients before they are prescribed opioids;
- In discharge planning discussions with patients, especially with regard to medication reconciliation; and
- As an informational handout at a hospital or in an online patient portal.

We also encourage hospitals and their medical staffs to consider using various pieces of the content in the following ways:

- To encourage clinician discussions with patients about opioids, and consider incorporating information into electronic health records and clinician workflow;
- In social media messaging on hospital Facebook accounts, Twitter or blog posts;
- In patient newsletters and other publications, as well as patient portals;
- At community events, such as when talking to Rotary groups or school assemblies about health issues; and
- In outreach to traditional media when discussing how your hospital and/or health system is addressing the opioid epidemic.

Other AHA Resources for Hospitals

Across the field, hospitals are adopting ED guidelines for the management of opioids; reviewing alternate ways to address pain; partnering with schools, law enforcement, departments of health and others to implement community-wide responses; creating system-wide task forces to assess how opioids are managed throughout their organizations; providing naloxone to first responders; engaging peer counselors to encourage patients with substance use disorders to seek treatment; participating in prescription drug take back efforts, and much more. To support hospitals and health systems in these and other efforts, the AHA has created a number of resources, described below.

Dedicated webpages: The AHA launched a [web page](http://www.aha.org/advocacy-issues/initiatives/behavioral/index.shtml) at <http://www.aha.org/advocacy-issues/initiatives/behavioral/index.shtml> dedicated to behavioral health, which provides resources, news and education, and describes our advocacy efforts in relation to mental health and substance use disorders. A [subset of this page](http://www.aha.org/advocacy-issues/initiatives/behavioral/opioid.shtml) offers specific resources about the opioid epidemic, at <http://www.aha.org/advocacy-issues/initiatives/behavioral/opioid.shtml>.

Information about implementing drug take back programs: In 2014, the Drug Enforcement Administration (DEA) issued a final rule to encourage hospitals with on-site pharmacies, narcotics treatment programs and retail pharmacies to consider joining the efforts already underway through law enforcement organizations to make it easier for those who legitimately obtained controlled substances to dispose of unused portions of their prescriptions. The rule offers hospitals with on-site pharmacies, addiction treatment facilities and retail pharmacies the opportunity to voluntarily become collection sites for their communities. For more details, see AHA's [advisory](#) on the final rule.

Webinars highlighting efforts of hospitals to fight the opioid epidemic: The AHA is working diligently to share best practices and member ideas for addressing this multifaceted epidemic. Below is a series of future and past webinars focusing on various strategies hospitals have employed, including hospital-based programs, community strategies, and statewide collaborative efforts. Click on the title of each webinar below for the registration link or recording. Please [check here](#) for updates to this list of educational webinars.

- July 22, 2:30 – 3:30 p.m. ET
[Our Community Responds to the Opiate Epidemic: Hospitals & Health Systems Impacting the Opiate Crisis](#)
Join us to hear how Oregon Health State University's multi-county collaborative developed a community standard to reduce the use of and addiction to opiates.
- May 25 (recording available on AHA's website)
[The Safe Passage Initiative: Hospitals & Health Systems Impacting the Opiate Crisis](#)
In this webinar, Katherine Shaw Bethea (KSB) Hospital and the police department in Dixon, IL, described their community partnership – The Safe

Passage Initiative: Police Giving Hope to Addicts through the Tools for Recovery.

- April 26 (recording available on AHA's website)
[Monterey County's Prescribe Safe Initiative: Montage Health, Monterey, CA](#)
Learn about the Prescribe Safe initiative created by law enforcement, four Monterey County hospitals, and local physicians. Prescribe Safe educates and provide resources for local physicians and patients in the safe use of prescription medications and promotes safe and effective pain management.
- March 22 (recording available on AHA's website)
[Clinical Pharmacist Chronic Pain Services: Implementing Interprofessional Care](#)
This webinar from the AHA's Physician Leadership Forum and the American Society of Health-System Pharmacists discusses how to improve care and outcomes for complex patients with chronic pain.
- March 8 (recording available on AHA's website)
[Combating the Opioid Crisis: Massachusetts' Path to Action](#)
This webinar reviews how the Massachusetts Hospital Association developed and launched a comprehensive and groundbreaking effort to combat the opioid crisis, including the creation of ED prescribing guidelines adopted by all Massachusetts hospitals.
- February 24 (recording available on AHA's website)
[Hospital and Health Systems Impacting the Opiate Crisis: Alexian Brothers Behavioral Health Hospital's Approach](#)
This webinar describes an innovative inpatient and outpatient detox program that has helped opioid dependent individuals move to and live in recovery and how these medication-assisted treatments can serve patients in a variety of settings.

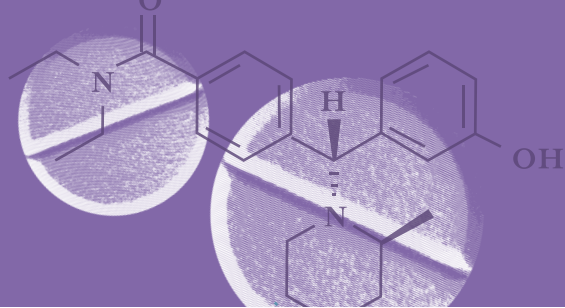
Clarification about The Joint Commission Pain Standards: On April 18, The Joint Commission issued a [statement](#) to dispel key misconceptions about its standards for treating pain in hospitals and other institutions. For example, The Joint Commission clarified that it *does not* endorse pain as the fifth vital sign or require that pain be treated until the pain score reaches zero. Further, the standards support both pharmacologic and nonpharmacologic patient-centered approaches to treat pain. Read an *AHA News* [interview](#) with David Baker, M.D., The Joint Commission's executive vice president for health care quality evaluation.

Hospitals & Health Networks feature issue on opioids: In its [March cover story](#), AHA's primary publication, *Hospitals and Health Networks (H&HN)* featured the opioid epidemic and how several hospitals are fighting on the frontlines to address it. [H&HN](#) continues to cover news and events related to the epidemic.

FURTHER QUESTIONS

For further questions, please contact Evelyn Knolle, senior associate director of policy, at eknolle@aha.org or (202) 626-2963.

PRESCRIPTION OPIOIDS: WHAT YOU NEED TO KNOW



Prescription opioids can be used to help relieve moderate-to-severe pain and are often prescribed following a surgery or injury, or for certain health conditions. These medications can be an important part of treatment but also come with serious risks. It is important to work with your health care provider to make sure you are getting the safest, most effective care.

WHAT ARE THE RISKS AND SIDE EFFECTS OF OPIOID USE?

Prescription opioids carry serious risks of addiction and overdose, especially with prolonged use. An opioid overdose, often marked by slowed breathing, can cause sudden death. The use of prescription opioids can have a number of side effects as well, even when taken as directed:

- Tolerance—meaning you might need to take more of a medication for the same pain relief
- Physical dependence—meaning you have symptoms of withdrawal when a medication is stopped
- Increased sensitivity to pain
- Constipation
- Nausea, vomiting, and dry mouth
- Sleepiness and dizziness
- Confusion
- Depression
- Low levels of testosterone that can result in lower sex drive, energy, and strength
- Itching and sweating

As many as
1 in 4
PEOPLE*



receiving prescription opioids long term in a primary care setting struggles with addiction.

* Findings from one study

RISKS ARE GREATER WITH:

- History of drug misuse, substance use disorder, or overdose
- Mental health conditions (such as depression or anxiety)
- Sleep apnea
- Older age (65 years or older)
- Pregnancy

Avoid alcohol while taking prescription opioids. Also, unless specifically advised by your health care provider, medications to avoid include:

- Benzodiazepines (such as Xanax or Valium)
- Muscle relaxants (such as Soma or Flexeril)
- Hypnotics (such as Ambien or Lunesta)
- Other prescription opioids



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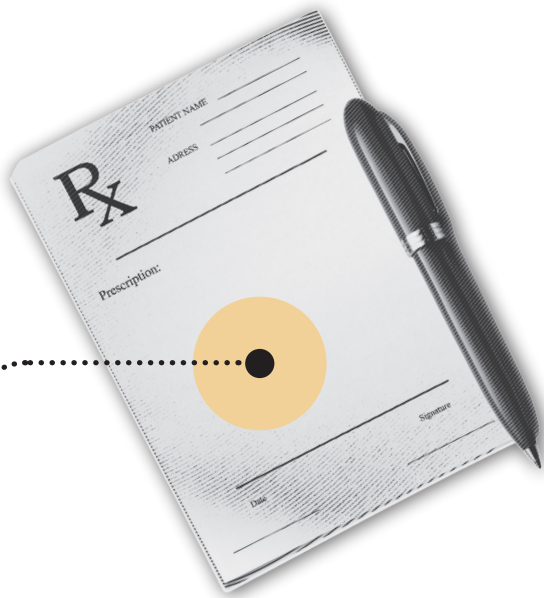


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KNOW YOUR OPTIONS

Talk to your health care provider about ways to manage your pain that don't involve prescription opioids. Some of these options **may actually work better** and have fewer risks and side effects. Options may include:

- ❑ Pain relievers such as acetaminophen, ibuprofen, and naproxen
- ❑ Some medications that are also used for depression or seizures
- ❑ Physical therapy and exercise
- ❑ Cognitive behavioral therapy, a psychological, goal-directed approach, in which patients learn how to modify physical, behavioral, and emotional triggers of pain and stress.



Be Informed!

Make sure you know the name of your medication, how much and how often to take it, and its potential risks & side effects.



IF YOU ARE PRESCRIBED OPIOIDS FOR PAIN:

- ❑ Never take opioids in greater amounts or more often than prescribed.
- ❑ Follow up with your primary health care provider within ___ days.
 - Work together to create a plan on how to manage your pain.
 - Talk about ways to help manage your pain that don't involve prescription opioids.
 - Talk about any and all concerns and side effects.
- ❑ Help prevent misuse and abuse.
 - Never sell or share prescription opioids.
 - Never use another person's prescription opioids.
- ❑ Store prescription opioids in a secure place and out of reach of others (this may include visitors, children, friends, and family).
- ❑ Safely dispose of unused prescription opioids: Find your community drug take-back program or your pharmacy mail-back program, or flush them down the toilet, following guidance from the Food and Drug Administration (www.fda.gov/Drugs/ResourcesForYou).
- ❑ Visit www.cdc.gov/drugoverdose to learn about the risks of opioid abuse and overdose.
- ❑ If you believe you may be struggling with addiction, tell your health care provider and ask for guidance or call SAMHSA's National Helpline at 1-800-662-HELP.