

Prescription Drug Abuse

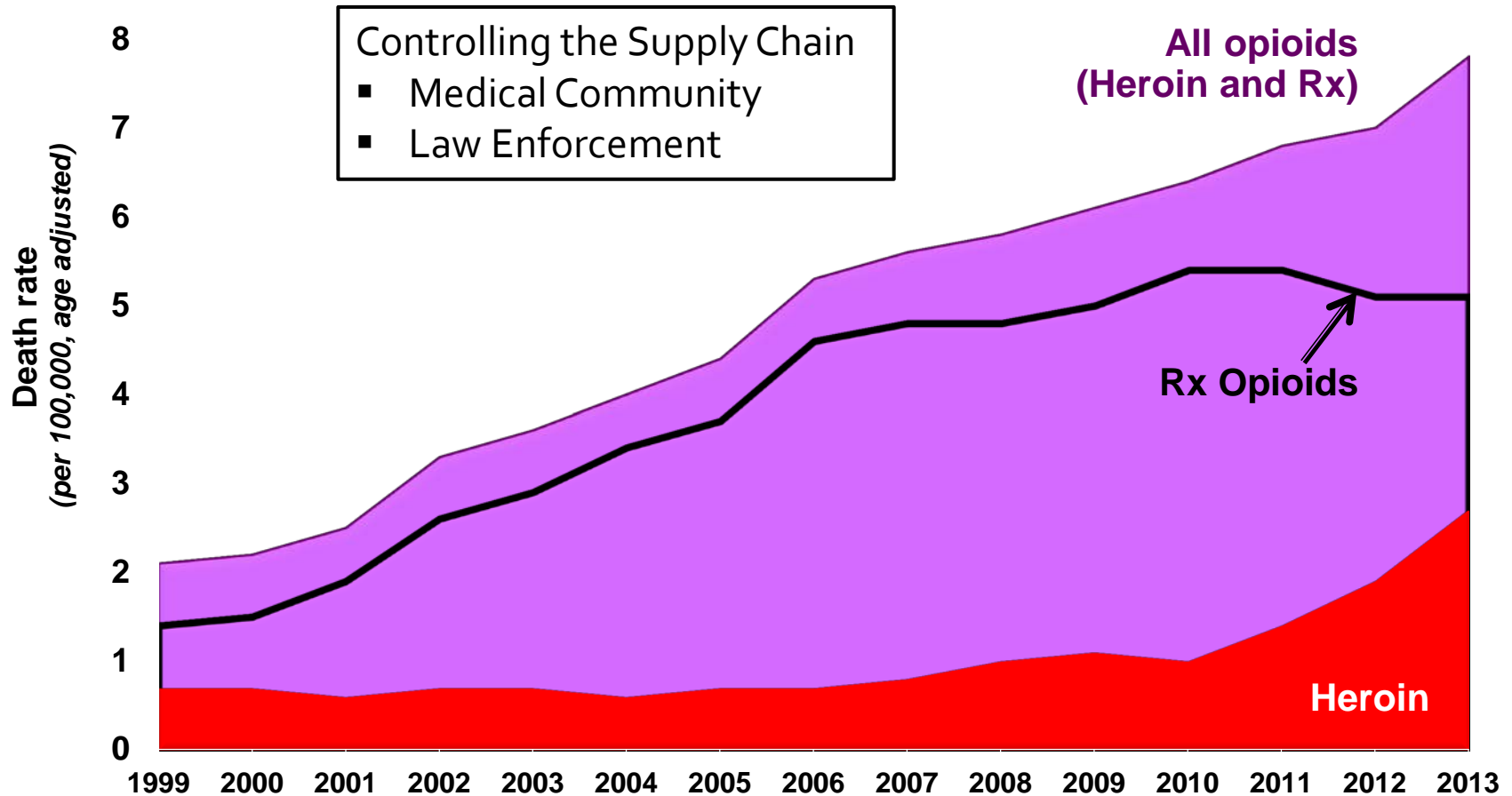
Health policy can END
prescription drug epidemic



Roneet Lev, MD FACEP

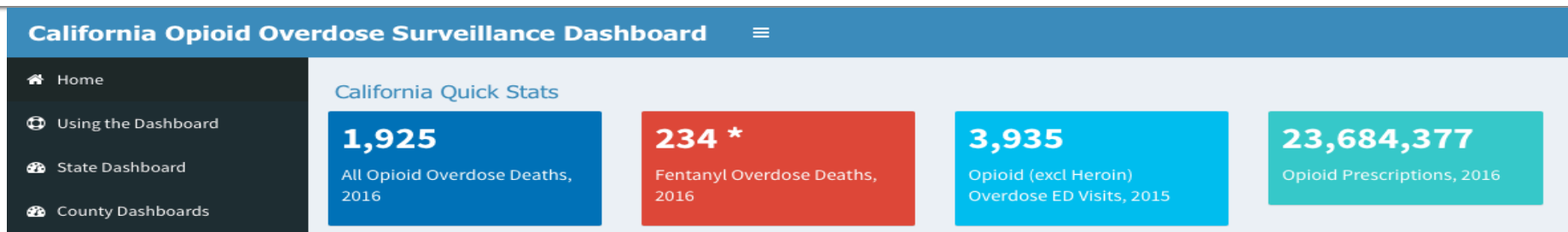
Chair, Emergency Department Scripps Mercy San Diego
Chair, San Diego Prescription Drug Abuse Medical Task Force
President, Independent Emergency Physicians Providers

Death Rates Prescription Opioids and Heroin



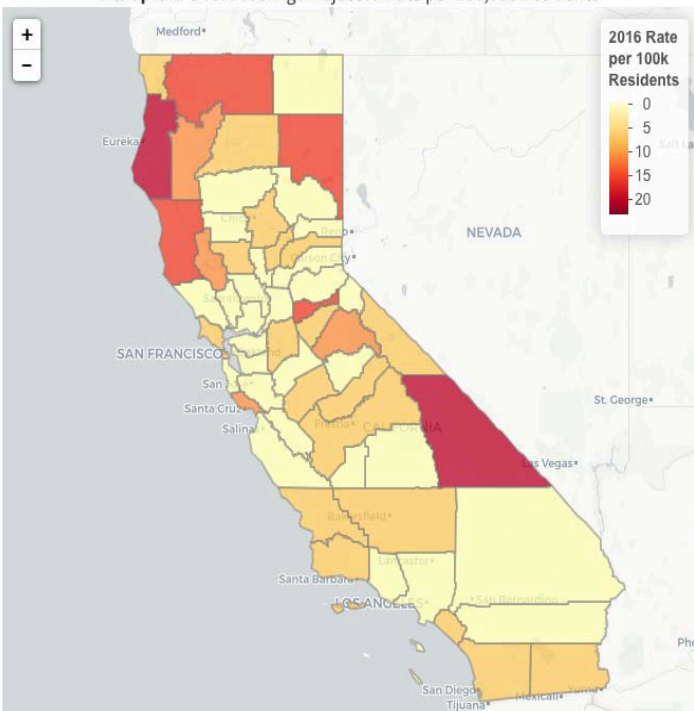
California Opioid Dashboard

https://pdop.shinyapps.io/ODdash_v1/



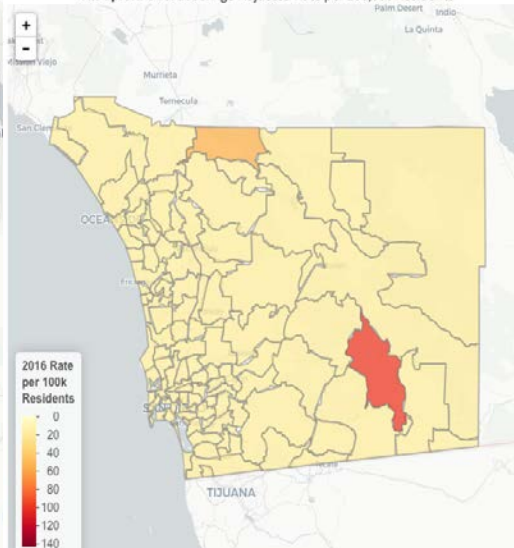
California Deaths - Total Population - 2016

All Opioid Overdose: Age-Adjusted Rate per 100,000 Residents



San Diego Deaths - Total Population - 2016

All Opioid Overdose: Age-Adjusted Rate per 100,000 Residents



ZIP CODE DEATHS

Opioids - 91962 (Pine Valley)

Heroin - 91962

All drugs - 92134 (Balboa Park)

Methadone - 92058 (Camp Pendleton)

Benzodiazepine - 92059 (Pala)

ZIP CODE RX

Buprenorphine - 92121 (Rancho Santa Fe)

Opioid+Benzodiazepine-91905 (Campo, Jacumba)

New Start LA Opioids - 91905

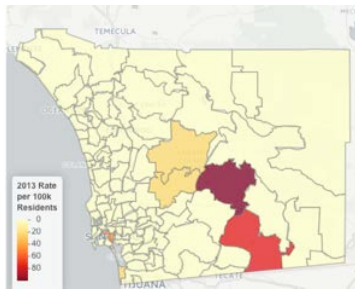
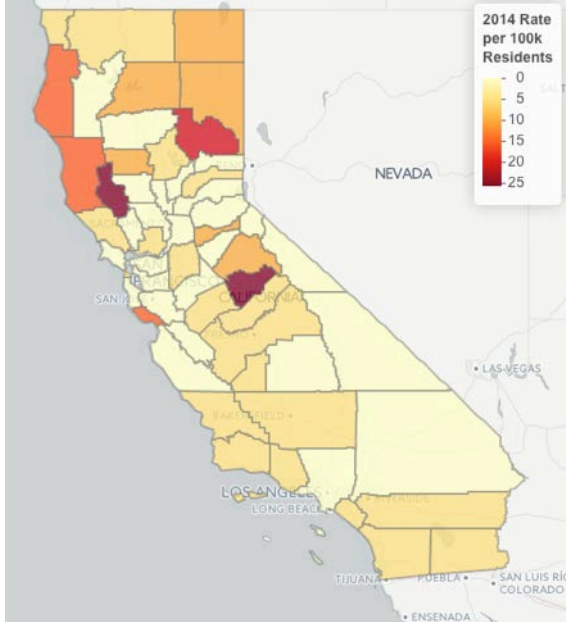
Deaths and Rx – California Dashboard

DEATHS 12 months, 2016 Q4, per 100 K	California	San Diego
All Drug Overdoses	4514 10.8	417 11.8
Prescription Opioids	1349 3.21	166 4.7
Heroin	565 1.4	74 2.1
Methadone	271 0.63	31 0.88
Benzodiazepines	513 1.23	108 2.98
Fentanyl	234 0.58	30 0.87

RX 12 months, 2016 Q4, per 1 K residents	California	San Diego
Opioids by patient location	603.4	554.8
MME per patient location	543.9	495.4
Residents > 90 MME	24	24.9
5+ pharmacies and providers	4919	509
Opioid Naïve on LA/XR	132,435	9718
Residents Opioid + Benzo	813,794	52,752

Community Report Cards

<https://pdop.shinyapps.io/ODc>
California Opioid Dashboard



	California 38.8 mil	SD 3.3 mil	Fresno <1 mil	LA 10.1 mil
Total Drug Deaths 2015	5025	450	152	751
Total Death Rate*2015	12.8	13.6	15.6	7.4
Opioid Deaths 2014	2024 = 4.8*	6.9* 244	7.3* 70	2.7* 291
Opioid ED Visits *rate	4106	9.9* 345	9.8* 92	6.4* 690
Opioid Hospital OD *rate	10.6*	7.5 * 465	13.6* 126	6.9* 745
Opioid Rx per 1K	619	575	766	463
Top Zip Code	Mariposa = 25.4*	91906=7 7*, Campo	93650 = 28*	93553 = 192*=Juniper Hill

**rate per 100,00*

San Diego Report Card

<https://www.sandiegorxabusetaforce.org>

2017 Prescription Drug (Rx) Abuse Report Card						
	Indicator	2012	2013	2014	2015	2016
1	Unintentional Rx-Related Deaths <ul style="list-style-type: none"> Number (Rate per 100,000 residents) 	268 (9.8)	259 (8.2)	244 (7.6)	248 (7.7)	253 (7.7)
2	Emergency Department (ED) Opiate Activity <ul style="list-style-type: none"> Number of Discharges (Rate per 100,000 residents) 	3,791 (121.2)	5,723 (181.7)	6,866 (214.9)	7,501 (228)	Not Available until 2018
3	11th Graders Self Report of Lifetime Rx Misuse		13%		14%	
4	Total Adult Drug Treatment Admissions <ul style="list-style-type: none"> Percentage of Prescription Pain Medication Percentage of Heroin 	14,383 4.7% 23.1%	16,629 4.5% 24.8%	16,104 4.5% 27.7%	15,177 4.3% 28.6%	15,790 4.1% 28.2%
5	Arrestees Self Report of Rx Misuse <ul style="list-style-type: none"> Adult Juvenile 	38% 40%	43% 37%	39% 37%	42% 43%	49% 40%
6	Rx Prosecutions¹ <ul style="list-style-type: none"> Rx-specific Fraud Charge Other Charges with Rx-involved 	523 1,089	431 1,064	308 1,237	117 1,353	140 1,422
7	Pharmacy Robberies/Burglaries	8	5	8	6	31
8	Pounds of Safely Disposed Medications <ul style="list-style-type: none"> Take Back Events Sheriff's Department Collection Boxes 	16,707 9,902	18,732 13,872	17,676 13,079	14,595 14,725	17,772 15,901
9	Annual Number of Dispensed Pills Per County Resident <ul style="list-style-type: none"> Pain Medication Anti-anxiety Stimulants 	37.9 13.8 4.8	36.3 13.7 4.9	39.7 13.3 4.7	39.1 ² 13.1 5	36.5 12.5 5.2

How We Got Here

1. Removed Speed Bumps
2. Created Prescribing Incentives
3. Kept changing physician education

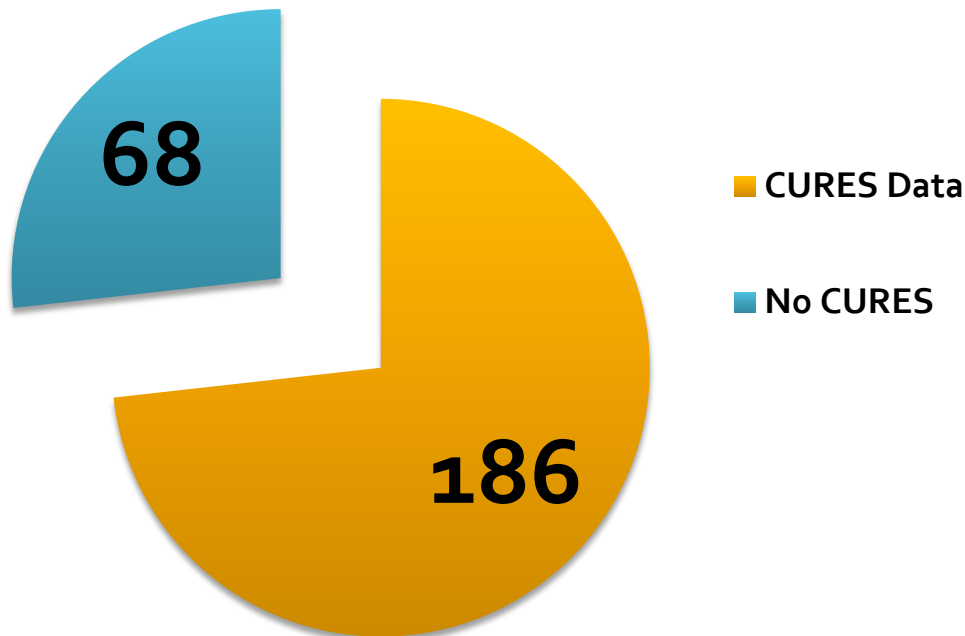
BAD HEALTH POLICY

- 1997 Senate Bill 402 The Pain Patient's Bill of Rights
- 1999 Pain – 5th Vital Sign
- 2001 Clinton Administration: Decade Pain Control and Research
- 2005 California Pain Management Standards
- Patient Satisfaction Surveys
- Frequent changes in medical education



San Diego Death Diaries

254 deaths +
12 month Prescription data before death



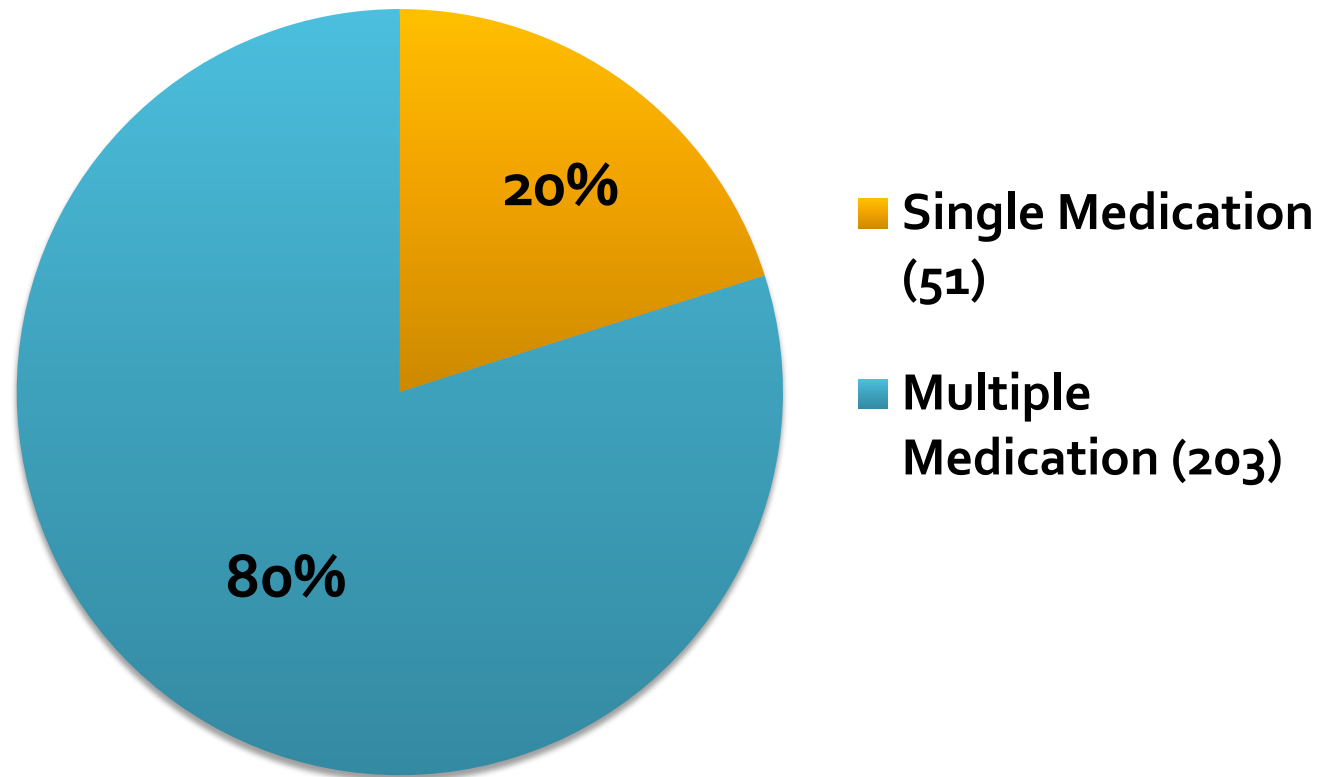
ME Data

- 254 deaths with prescriptions as cause of death in 2013

CURES Data (aka PDMP)

- Did not Include
 - VA
 - Balboa Naval Hospital
 - Methadone Clinics
 - Inpatient hospitals

Most die of a cocktail



It's not just Opioids!

OPIOIDS BENZODIAZEPINES SLEEP STIMULANTS OTHER

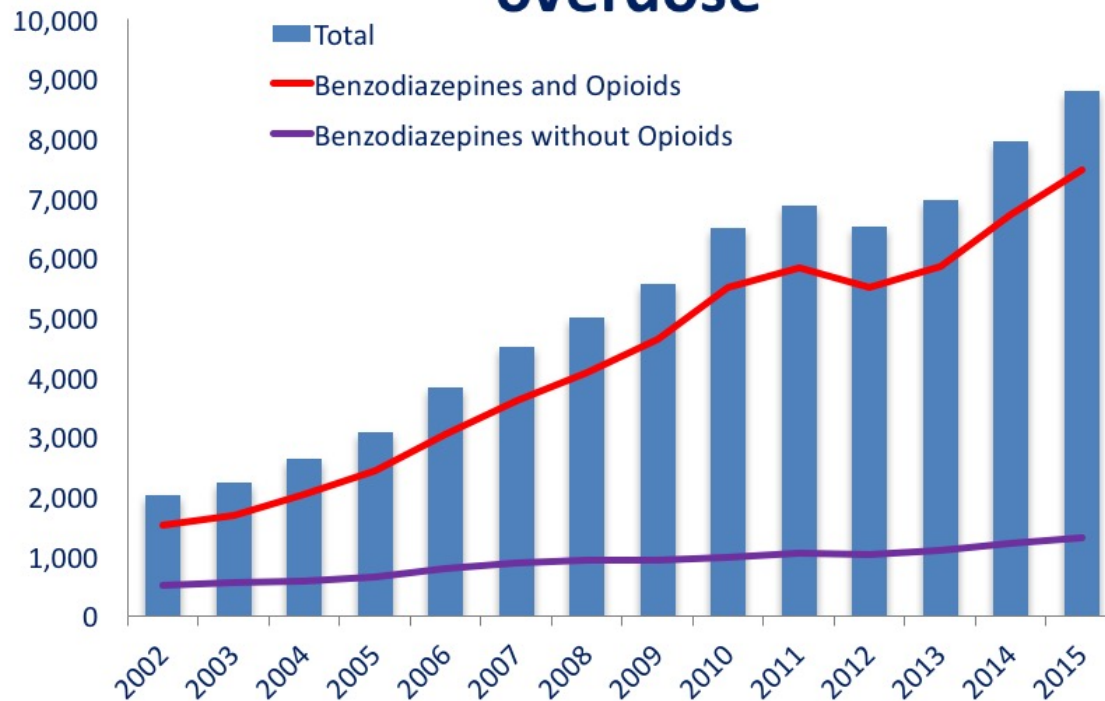
33 Medications; 4366 Rx

Hydrocodone	123	Chloriazepoxide	17	Oxazepam	3
Oxycodone	84	Tempazepam	17	Oxymorphone	3
Clonazepam	44	Methadone	14	Phenobarbitol	3
Zolpidem	43	Fentanyl	13	Chloral Hydrate	2
Alprazolam	39	Buprenorphine	11	Dronabinol	2
Lorazepam	37	Amphetamine	7	Zaleplon	2
Morphine	32	Testosterone	6	Clorazepate	1
Carisoprodol	30	Triazolam	6	Estrogen	1
Codeine	27	Lunesta	4	Lisdexamefetamine	1
Diazepam	26	Lyrica	4	Methylphenidate	1
Hydromorphone	20	Phentermine	4		

Opioids + Benzodiazepines Kill



Opioid involvement in benzodiazepine overdose

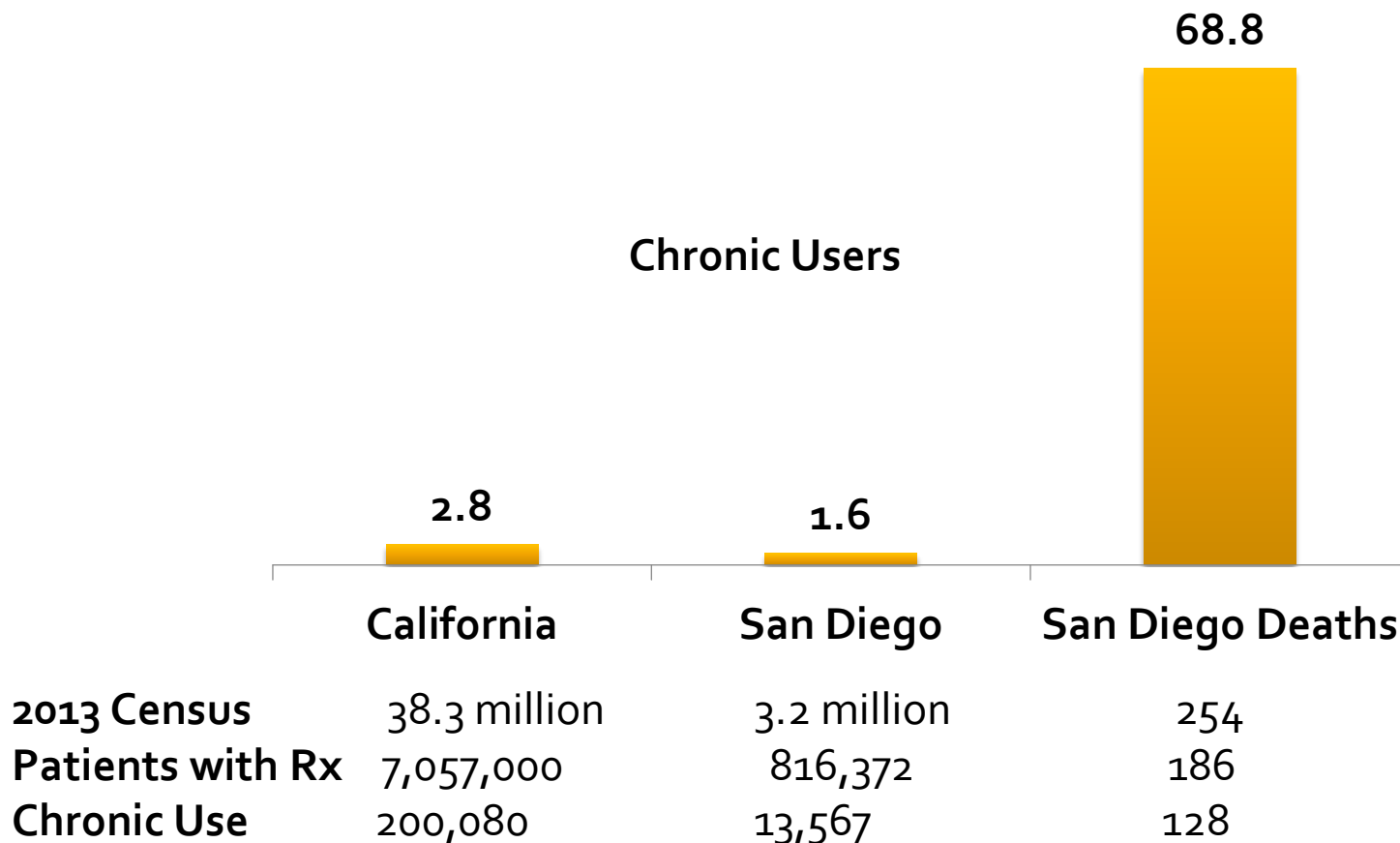


Source: National Center for Health Statistics, CDC Wonder

Chronic User are at risk

3 or More Consecutive Months For Same Rx

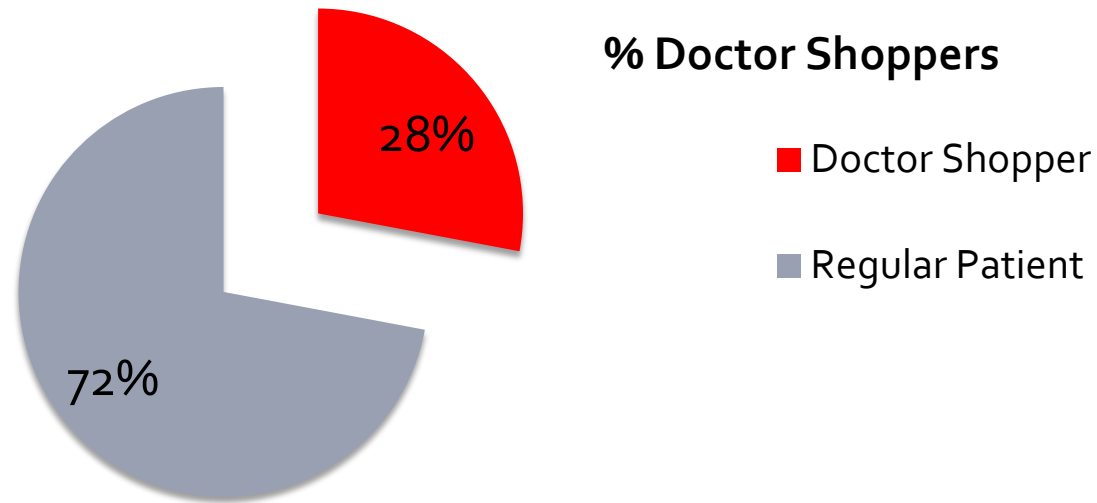
- 69% of Deaths were Chronic Users; 96% of all Rx



Doctor Shoppers are not majority

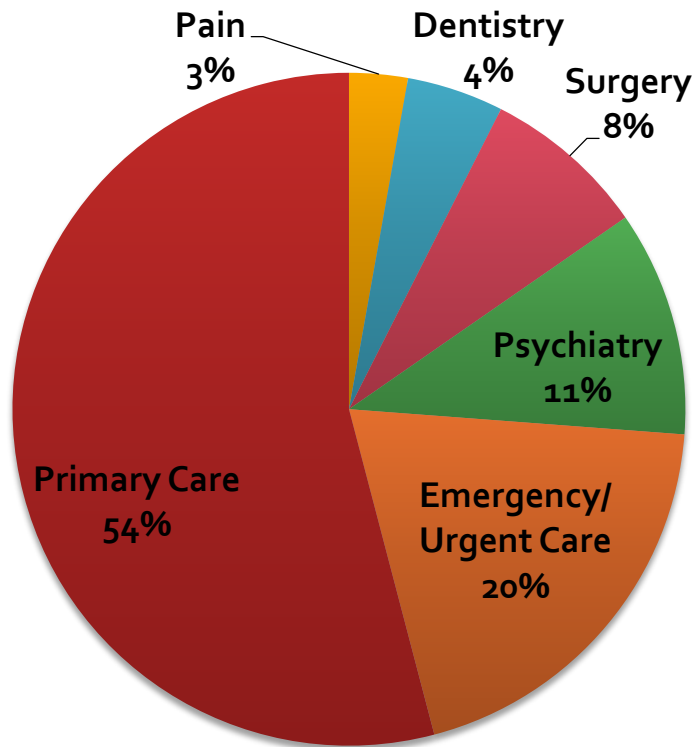
4 providers + 4 pharmacies in 12 months

- 28% of all PDMP Reports, 59 patients were Doctor Shoppers
- “The Heavy Half” = Received 51% of all Rx
- 50/50 Male/Female



Who are the Prescribers?

- 713 total

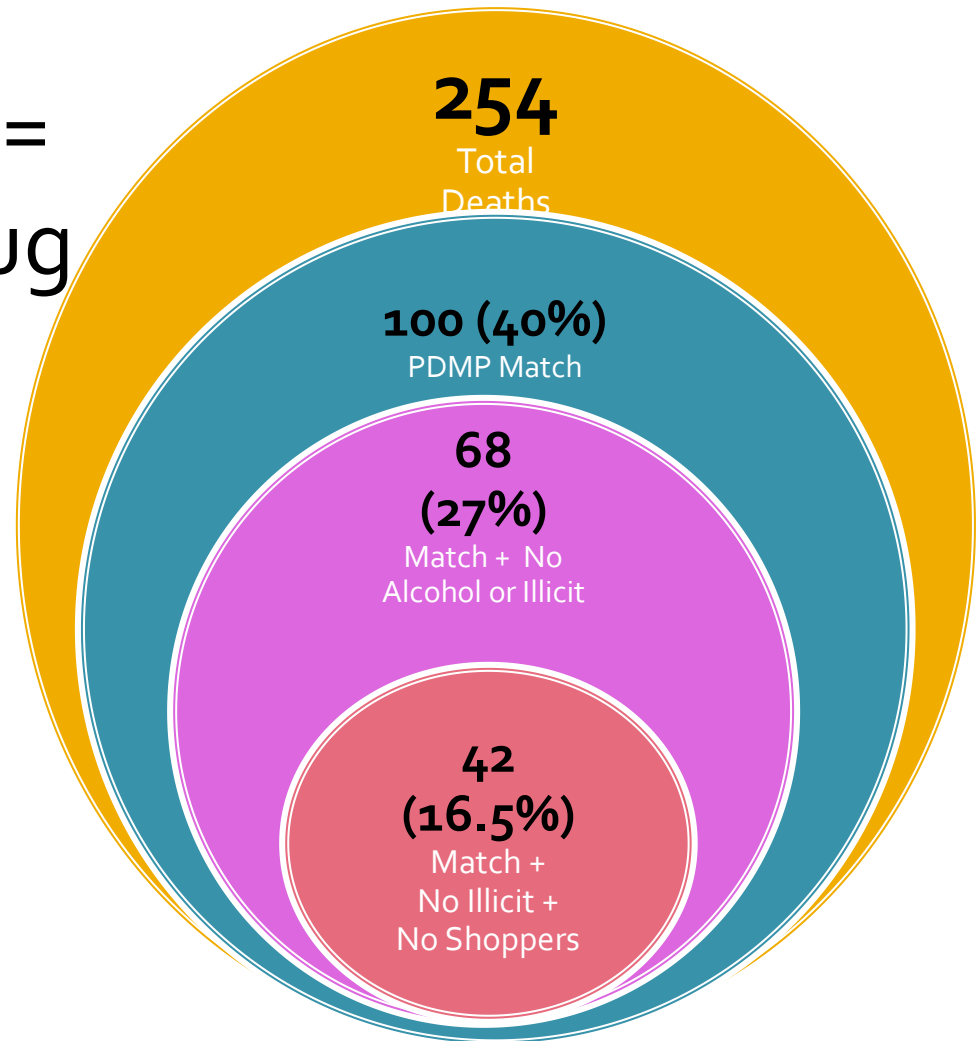


- **PRIMARY CARE**
the majority of prescriptions
- **EMERGENCY PHYSICIANS**
many people who die visit ER before death, many doctors – few prescriptions
- **PSYCHIATRISTS**
#2 in terms of highest number of prescriptions
- **SURGEONS**
Highest number of pills per prescription
(189 pill average for orthopedics)

Few Deaths were compliant patients

16.5% “Compliant” =

- Die with same drug prescribed
- No illicit drugs or alcohol
- Not doctor shopping



Projects and Best Practices

- Community
- Health Plans
- Hospitals
- Clinics
- Physicians
- **Health Policy**



The PDA Medical Task Force



- PDA TF Facilitator
- DEA
- Emergency Physicians
- Primary Care
- Pain Management
- Addiction
- Pharmacy
- Hospital Association
- Dental Association
- Psychiatric Association
- Pediatric Association
- Kaiser
- Scripps
- Sharp
- Community Clinics
- VA
- Military
- Palomar Health
- Indian Health
- Methadone Clinics
- Needle Exchange



Emergency and Urgent Care Guidelines

SAFE PAIN MEDICINE PRESCRIBING IN EMERGENCY DEPARTMENTS

We care about you. We are committed to treating you safely and in the right way.

Pain relief treatment can be complicated. Mistakes or abuse of pain medicine can cause serious health problems and death.

Our emergency department will only provide pain relief options that are safe and correct.

For your SAFETY, we follow these rules when helping you with your pain.

1. We look for and treat emergencies. We use our best judgment when treating pain. These recommendations follow legal and ethical advice.

2. You should have only ONE provider and ONE pharmacy helping you with pain. We do not usually prescribe pain medication if you already receive pain medicine from another health care provider.

3. If pain prescriptions are needed for pain, we can only give you a small amount.

4. We do not refill stolen prescriptions. We do not refill lost prescriptions. If your prescription is stolen, please contact the police.

5. We do not prescribe long acting pain medicines: OxyContin, MSContin, Dilaudid, Fentanyl (Duragesic), Methadone, Opana ER, Exalgo, and others.

6. We do not provide missing doses of Subutex, Suboxone, or Methadone.

7. We do not usually give shots for flare-ups of chronic pain. Medicines taken by mouth may be offered instead.

8. Health care laws, including HIPAA, allow us to ask for your medical records. These laws allow us to share information with other health providers who are treating you.

9. We may ask you to show a photo ID when you receive a prescription for pain medicines.

10. We use the California Prescription Drug Monitoring Program called CURES. This statewide computer system tracks narcotic and other controlled substance prescriptions.



If you need help with substance abuse or addiction, please call

1-888-724-7240
for confidential referral and treatment.

All the emergency departments in San Diego & Imperial Counties have agreed to participate in this important program.



HOSPITAL ASSOCIATION
of San Diego and Imperial Counties



- Safe Prescribing
- Intervene in Poor Prescribing

Medication Agreement

PATIENT MEDICATION AGREEMENT for Painkillers, Anxiety Medication, Stimulants, and all Controlled Substances

You are being prescribed a medicine that has many risks. The medicine also has special laws that the doctor and patient must follow.

It is important that you follow all these instructions, EXACTLY.

- For Chronic Medication
= 3 months
 - Only 1 provider and 1 pharmacy
 - No ED visit
 - No refills
 - Do not drive if impaired
- ☐ These medicines are dangerous. They can cause serious health problems, including death, even if taken as prescribed. They are also addicting.
 - ☐ You should get your medicine from only ONE provider and ONE pharmacy. This helps prevent side effects and overdoses.
 - ☐ Take the medication only as you are told. Do not take more medicine than you are prescribed. They need to last you until your next appointment.
 - ☐ Your medicine is only for you. Do not share your medicine. Do not allow others to use your medicines. Do not sell or trade your medicines.
 - ☐ Keep your medications secure. We recommend locking them. Lost or stolen medication means other are in danger.
 - ☐ All emergency departments in San Diego and Imperial Counties have stated that they will not prescribe these medications if you lose them or feel you need more.
 - ☐ The dangers of the medicine are greater with anything that makes you sleepy. Mixing your medicine with alcohol, street drugs, sleeping pills, or other drugs can make you sick or die.
 - ☐ Do not drive a car or do dangerous activities if you are not fully alert when on these medicines.
 - ☐ Your treatment will be monitored in different ways. You may be asked to do a drug test. You may be asked to show your pills. The State of California tracks your prescriptions.
 - ☐ If your provider feels that your medicine is not helping, the medicine will be stopped. You will be treated with other methods.



HOSPITAL ASSOCIATION
of San Diego and Imperial Counties
ADVOCATES FOR ACCESS TO HEALTH CARE FOR ALL CALIFORNIANS

Medical Community Standard

- All medical providers, regardless of specialty, are encourage to follow the following 5 measures for Safe Prescribing



One Provider, One Pharmacist

Use CURES (PDMP)

Medication Agreement

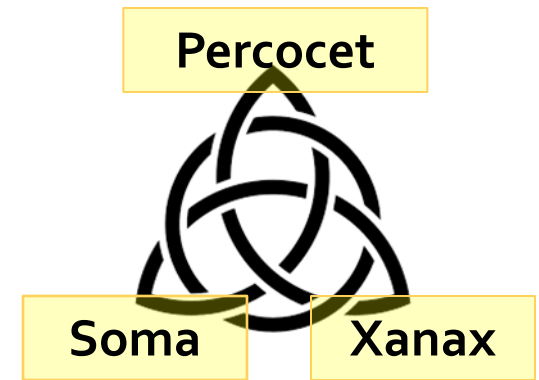
No Opioid + Benzodiazepines

Honor Emergency Guidelines

Naloxone

Red Flag Medications

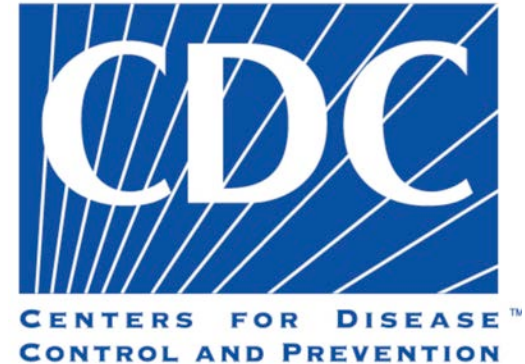
- UnHoly Trinity
- Benzodiazepine plus Opioids
- Soma (Carisoprodol)
- Ambien (Zolpidem) – long term
- Xanax - long term
- Long acting Opioid - by ED provider
- Methadone - by Primary Care
- Cough syrup with Codeine
- Tramadol



Morphine Equivalents	
Morphine 1 mg	1
Hydrocodone 5 mg	5
Tramadol 50 mg	10

CDC Guidelines

- START **LOW**, GO **SLOW**
 - Ibuprofen + Acetaminophen Combination
- Don't **START** without plan to **STOP**
- No **Long Acting opioids** for acute pain
- **Naloxone** for MME > 50



Dr. Debbie Dowell

Pain Management Goals

- According to The Joint Commission, it is expected that patient pain is addressed
- **NO** expectation that pain is reduced to **0** on a scale
- **NO** expectation that pain treatment requires pharmaceutical intervention



Electronic Health Records

- Push PDMP Data
- Alert >90 Morphine Equivalents
- Alert New Long Acting Opioid
- Alert Opioid + Benzodiazepine
- Alert Xanax
- Alert cough medicine with codeine
- Automatic Quantity - 15
- Automatic Naloxone if
 - > 50 MME,
 - Opioid -Benzodiazepine



Pediatricians for Prevention



**SAFETY
FIRST**

- Lock It
- Count It
- Dispose It
- Avoid It

Scripting -How to Say No Nicely



- Don't be the Candy Man
- Don't be the Candy Land

- Can I have a pain prescription?
Yes, let me check and see what the best option is
- Benzodiazepine + Opioid
I see you have a medication interaction. You need to discuss this with your physician and in the meantime, please do not take them at the same time
- Doctor Shopper
For your safety your medications need to be coordinated by one doctor and one pharmacist. I can address your pain today, but I won't be able to write a prescription
- Nothing works for me
Tell me how you are taking your medication

Pharmacy Scripting

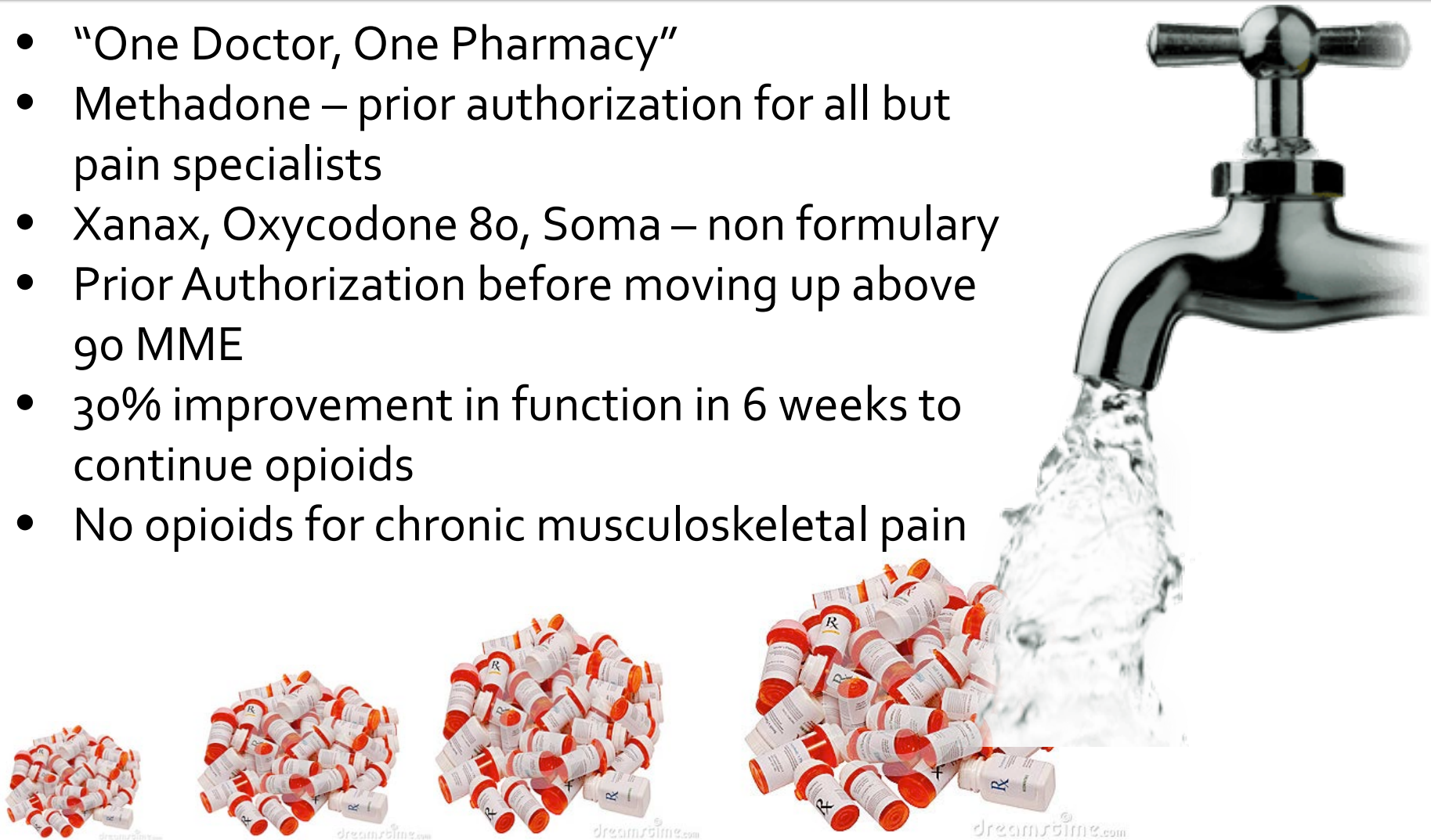
"We are calling to clarify a prescription on patient X, for Soma. We are calling because we noticed that this is a new start prescription for Soma. Soma is non formulary for new starts with several health plans in San Diego and not a recommended muscle relaxant by the San Diego Prescription Drug Abuse Medical Task Force."

1. Unholy Trinity
2. New Soma
3. New start Methadone
4. Multiple prescribers
5. New start high morphine equivalents
6. Naloxone



Heath Plans – Closing the Faucet From the Top

- “One Doctor, One Pharmacy”
- Methadone – prior authorization for all but pain specialists
- Xanax, Oxycodone 80, Soma – non formulary
- Prior Authorization before moving up above 90 MME
- 30% improvement in function in 6 weeks to continue opioids
- No opioids for chronic musculoskeletal pain



Letters from the Medical Examiner ME to run CURES reports



- <https://clinicaltrials.gov/ct2/show/NCT02790476>
- July 1, 2015 – June 30, 2016
- 220 prescription opioid deaths
- 808 prescribers (10% of all San Diego prescribers), 50% received a letter
- Those who received a letter reduced MME by 7.12 per day and 151 fewer new start opioids

Naloxone

Like giving an Epi Pen to patient with allergies

- 50 morphine equivalents per day
- Opioid + Benzodiazepine

- Naloxone Distribution Grant
- CDPH grant for increase access
 - Pre-written prescriptions



Figure 1. Evzio home-use auto-injector to reverse the effects of an opioid overdose.



Don't Fire – Refer to Addiction Treatment

Identify and Treat Addiction – don't just “fire” from clinic
Integrative Treatment: Behavioral Health, Pain, Addiction



- 4 community clinics received grants for MAT treatment
- Fashion Valley is Hub with several clinics as spokes for MAT

Advice Line - You Are Not Alone

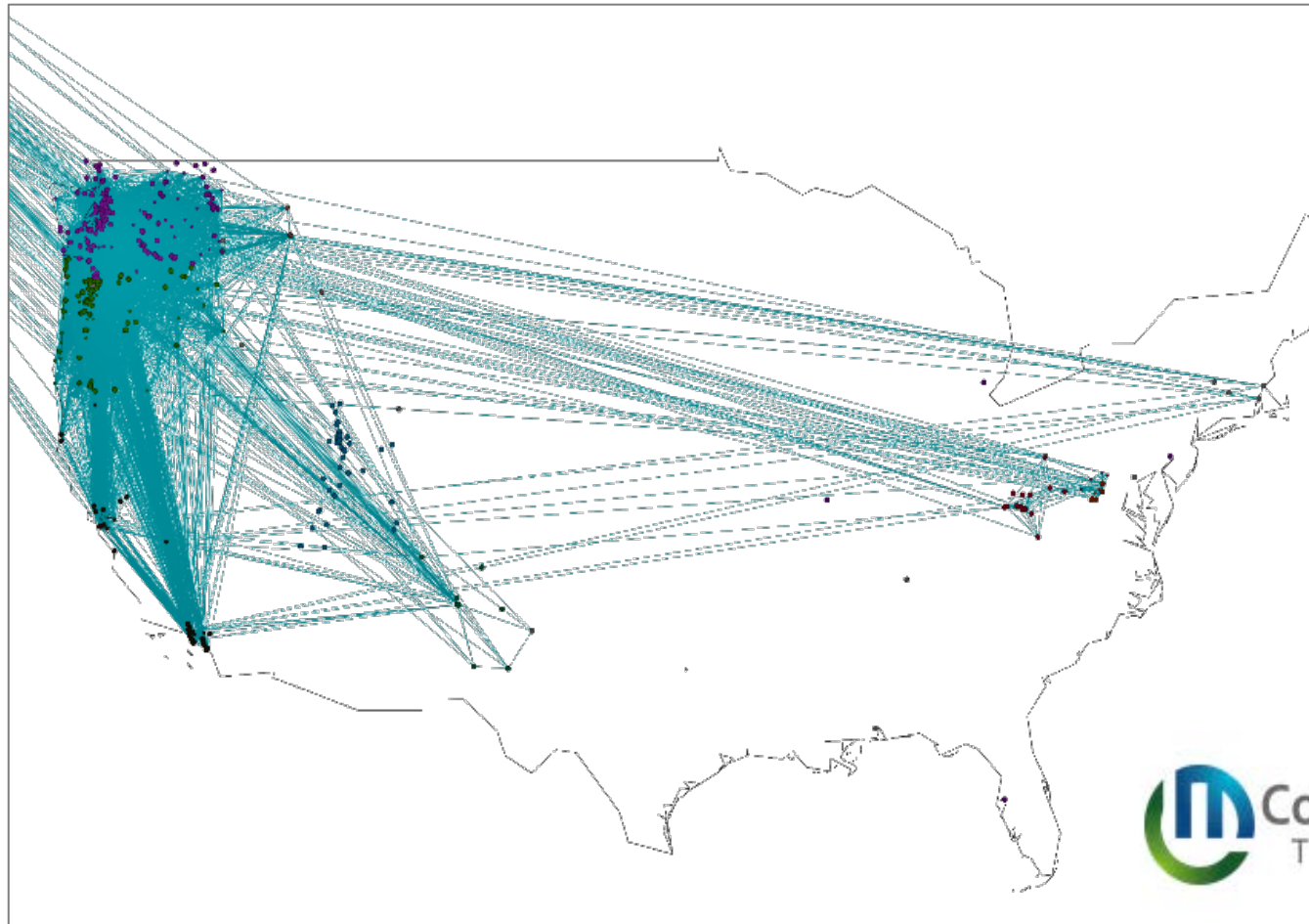
- Clinical Consultation Center

- Monday – Friday
- 10 am – 6 pm EST
- 855-300-3595



- Consultation is available from addiction medicine-certified physicians, clinical pharmacists, and nurses with special expertise in pharmacotherapy options for opioid use. Voicemail is available 24-hours a day.

Patient Movement in EDIE



- 2017
- 500 hospitals
- 13 states



Benjamin Zaniello, MD, CMO Collective Medical Technologies

Care Coordination



Health Policy

- CMS/ Health Plans need stricter guidelines – stop paying for drugs that kill
- Medication Assistance program enter data to PDMP - your privacy shouldn't kill you
- Connect PDMP , Connect Case Management - communicate shared treatment plans
- Naloxone – over the counter, automatic prescriptions - increase access
- Remove Financial Incentives for Patient Satisfaction - money tied to surveys are barriers to safe prescribing

SanDiegoSafePrescribing.org

**San Diego County Medical Society**
"Physicians United for a Healthy San Diego"


California Medical Association

PHYSICIAN QUICKLINKS MEET OUR PHYSICIANS **MEMBERSHIP FAQS** PARTNER ORGANIZATIONS

San Diego Safe Prescribing:

- Introduction
- Patient and Community Resources
- Patient Pain Agreement
- Safe Pain Medication Prescribing in Emergency Departments
- Provider Guidelines
- Educational Materials
- Relevant Articles

SanDiegoRxAbuseTaskForce.Org

**San Diego County
Prescription Drug Abuse Task Force**
Info@SanDiegoRxAbuseTaskForce.org



Who We Are Commonly Misused Medications Addiction Help Resources Medication Safety & Disposal Teens Local Statistics Doctor's Desk Legislation Newsroom Links

**Making Healthy Choices about Prescription Drugs**
PDATF Web Videos Dave Roberts 042014


References

- Lev, R et al "A description of Medical Examiner prescription –related deaths and prescription drug monitoring program data" *American Journal of Emergency Medicine*. December 2015.
- Lev, R et al "Methadone Deaths Compared to All Prescription Related Deaths" *Forensic Science International*. 2015
- Lev, R et al "Who is prescribing controlled medications to patients who die from prescription drug abuse?" *American Journal of Emergency Medicine*. Oct 2015.