Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover
Buprenorphine Induction in Emergency Departments

STR Webinar Wednesday
Melinda Campopiano, MD
Topics

• Background
• Evidence
• Implementation

Abbreviations:

Emergency department  ED
Opioid use disorder   OUD
Substance use disorder  SUD
Electronic health records  EHR
Screening, brief intervention and referral to treatment:  SBIRT
Background: Benefits of Medication for Opioid Use Disorder (OUD)

- Reduces all cause mortality
- Reduces HIV risk
- Improves adherence to medical treatment
- Improves social function
- Decreases criminal behaviors
- Decreases drug use
Medications

• Methadone and buprenorphine are approved by the FDA to treat opioid use disorder
  • Both are opioid agonists

• Extended-release injectable naltrexone is approved by the FDA for the prevention of relapse to opioid use after detoxification
  • An opioid antagonist
Detoxification is not treatment.
Evidence

- Emergency Department–Initiated Buprenorphine/Naloxone Treatment for Opioid Dependence


Study Participants

- One third presented seeking treatment.
- About 9% presented with overdose.
- One quarter reported only prescription opioid misuse.
- More than half reported injection drug use (IDU).
- Common:
  - Polysubstance use, comorbid psychiatric illness, past drug and/or alcohol treatment.
Three study groups

• Screening and individualized referral by research assistant
• Brief intervention and referral
• Buprenorphine and referral (appointment)
  • Day 1-8mg, Day 2-16mg, 10 weeks of therapy
  • Enough medication provided to last until appointment
  • Patients not in acute withdrawal allowed to start medication at home.
Outcomes at 30 days

- 78% of buprenorphine group patients were engaged in treatment at 30 days.
- Approximately 40% of patients in the other two groups were engaged in treatment at 30 days.
- All groups reduced illicit substance use with the largest reduction in the buprenorphine group.
- HIV risk behaviors decreased for all groups.
Outcomes at 2, 6 and 12 months

- 74% of buprenorphine group patients were still in treatment at 2 months.
- Approximately 50% of other two groups were in treatment at 2 months.
- No significant difference in treatment engagement at 6 or 12 months across groups.
- Decrease in illicit use reported at 30 days persisted.
Implementation: Essential Elements

• Standardized SUD SBIRT process
• Provision of naloxone and overdose prevention education
• Buprenorphine induction for those who want it
• Referral to preferred therapy for those who do not
• Recovery oriented discharge planning
Implementation: Challenges

- Treatment capacity in the community
- Buy-in
- Workflow change
- Staffing