

# Opioid Addiction: Harm Reduction Strategies

Cara A. Poland, MD, M.Ed., FACP, DFASAM  
Medical Director, Spectrum Health  
Assistant Professor, Michigan State University  
Past President, Michigan Society of Addiction Medicine

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## Agenda

- Epidemiology of Addiction
- Harm Reduction Strategies
- Naloxone
- Health Related Stigma

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## Opioid Numbers

IN 2018...

 **128** People died every day from opioid-related drug overdoses (4.6 % decrease from 2017)

 **Deaths** attributed to overdosing on commonly prescribed opioids<sup>2</sup> **14,975**  
on fentanyl and other synthetic opioids<sup>2</sup> **31,335**  
on heroin<sup>2</sup> **14,996**

 **Decreases since 2017**  
2% Opioid-involved death rates  
13.5% Prescription opioid-involved death rates  
4% Heroin-involved death rates  
10% Increase Synthetic opioid-involved death rates (excluding methadone)

 **\$696B**  
In economic costs<sup>3</sup>

Source: The opioid epidemic and its impact on U.S. lives. The [CDC](#).<sup>1</sup> [NIAAA](#) reports on the burden of alcohol use disorder.

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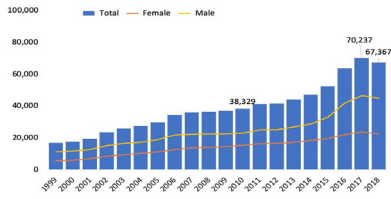
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## National Drug Overdose Deaths

Figure 1. National Drug Overdose Deaths Number Among All Ages, by Gender, 1999-2018



Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Multiple Cause of Death 1999-2018, as of 10/20/2019. Female (blue), Male (orange)

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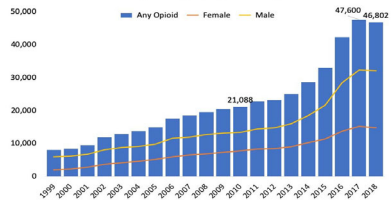
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## Opioid Overdose Deaths 1999-2018

Figure 3. National Drug Overdose Deaths Involving Any Opioid, Number Among All Ages, by Gender, 1999-2018



Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Multiple Cause of Death 1999-2018, as of 10/20/2019. Female (blue), Male (orange)

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## Addiction in Community

*"The world breaks everyone.  
And afterward, some are strong  
in the broken places."*

—Ernest Hemmingway, *A Farewell To Arms*

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What are Harm Reduction Strategies?

- Harm reduction strategies aim to reduce the harmful consequences associated with high risk activities
- They reduce risk of communicable diseases and fatal overdose
- They are not intended to save or rescue people, they are there to support individuals without judgment or assumption

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Harm Reduction in Opioid Use

- Syringe Exchange
- Naloxone Distribution
- Supervised Injection Facilities

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**Why do Harm Reduction?**

- Keeps people alive
- Engages them with health care
- Reduces the ill effects of substance use
- Opportunity for education and referral

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**Agenda**

Epidemiology of Addiction  
Harm Reduction Strategies  
**Naloxone**  
Health Related Stigma

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**Definitions**

Opiates

- Derived from the opium poppy or are synthetically manufactured
- Differ in strength and half life  
Long acting vs. short acting preparations

Naloxone

- Opiate antagonist
- Used for decades
- Good safety profile

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### Risk Factors for Opioid Overdose

Chronic lung or liver disease	Advanced AIDS
Elderly	Reduced tolerance
Obstructive sleep apnea	Illness
Concomitant benzodiazepine or other sedative	Depression
Concomitant muscle relaxant	Unstable housing
Opioid rotation	Mixing drugs
Alcohol	Changes in drug supply
	Using in a new environment
	History of previous overdose

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### Most Common Opioids

Hydrocodone	Tylox	Morphine
Oxycodone	Percocet	Darvocet
Levorphanol	Percodan	Fentanyl
Vicodin	Heroin	Dilaudid
OxyContin	Codeine	Methadone
Tylenol 3	Demerol	Opium

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### The Opioid Epidemic - Naloxone

Opioid-related overdose may occur from:

- Deliberate misuse of illicit or prescription opioids
- Dosing errors
- Patient misunderstanding of medication instructions
- Patient taking prescribed opiate medication as directed

Naloxone can prevent death from opioid overdose if administered quickly and appropriately

Emergency Department clinicians can impact the opioid epidemic

- Safer opioid prescribing practices and developing Overdose Education and Naloxone Distribution Programs (OEND)

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## An Antidote Exists

Naloxone (Narcan®) is an injectable opioid *antagonist* which reverses the effects of opioids preventing fatal overdose

- Naloxone pushes most opioids off the receptors then blocks it preventing it from being activated for 30-90 minutes



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## Naloxone

Prescribe for patients with higher risk of overdose

- History of Opioid Use Disorder
- On medications that increase respiratory depression
- History of overdose
- Household members who are at high risk of witnessing an overdose

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## Naloxone

- Increased availability in community saves lives
- Injectable, nasal spray, auto injector
- Standing orders at most pharmacies
- Widely covered by insurance

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## Naloxone Does Not Work for Other Substances

Alcohol

Benzodiazepines

- Xanax<sup>®</sup>,
- Valium<sup>®</sup>, Klonopin<sup>®</sup>

Tricyclic Antidepressants

- Amitriptylene (Elavil<sup>®</sup>)
- GHB

Cocaine

Amphetamines

Methamphetamine

Ecstasy

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## Naloxone Education

### Naloxone Distribution

As of Fall 2018, Spectrum Health ED's are distributing take-home intranasal naloxone for patients presenting with opioid overdose

### Naloxone Video

A video on how to administer naloxone is now available on Spectrum Health YouTube, Channel 106 in Grand Rapids and through a QR code found on the take-home intranasal naloxone kits



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## Naloxone Education

The more people trained in how to **prevent**, **recognize** and **respond** to an opioid overdose in the community the greater the impact on opioid related mortality

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## The Adult Drug Court Best Practice Standards

- Drug court educates participants, family members, and close acquaintances about avoiding or reversing overdose
- Drug court supports local efforts to teach drug court personnel, probation officers, law enforcement and other first responder to lawfully, safely, and correctly use overdose reversal medications like naloxone

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Remember...



**NALOXONE  
SAVES LIVES.**

Photo Credit: Getty.com

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## What is Stigma

Disapproval or discrimination against a person based on perceivable attitudes, behaviors, or conditions that serve to distinguish them from others.

Social stigmas are commonly related to culture, gender, race, intelligence, and health

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## Words Matter

They determine how we understand and perceive our world. They carry power, for good and for ill.

Stigma is driven by pejorative words, the labels that are used to describe us. This is not a matter of political correctness.



Source: <http://broken-no-more.org/power-words/>

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## Words Matter

Until we are provided the same respect and dignity as everyone else, we will continue to die.

We have to change the cultural perception of those with an opioid use disorder. To do that, we have to first change the language of opioid addiction.



Source: <http://broken-no-more.org/power-words/>

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## Words Matter

The words "addict" and "clean" do not reduce stigma they drive it

A person is NOT an addict → A person may live with an addiction  
 A person is NOT in recovery → Their addiction may be in remission  
 A person is NOT clean or dirty based on their drug use

Source: <http://broken-no-more.org/power-words/>

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## Avoid stigmatizing language

The language we choose shapes the way we treat our patients

⊗ Instead of:	⊕ You can say...
Addict, junkie, crackhead, user, abuser, pill-popper, alcoholic	Person with a substance use disorder, person with addiction, person who uses drugs
Addicted baby	Infant with NAS or SEN
Clean (referring to a person), in recovery	Abstinent, in remission
Dirty (referring to a person)	In a period of relapse, or disease exacerbation
Dirty or clean urine	Negative or positive urine toxicology test
Medication-assisted treatment (MAT), replacement therapy, substitution therapy	Medications for opioid use disorder treatment (MOUD), treatment, opioid agonist therapy, medication for addiction
Misuse or abuse*	Risky or unhealthy alcohol/drug use
Recovering addict, clean	Addiction survivor, in remission, in recovery

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## The Real Stigma of Substance Use Disorders

In a study by the Recovery Research Institute, participants were asked how they felt about two people "actively using drugs and alcohol."

One person was referred to as a "substance abuser"



The other person as "having a substance use disorder"



No further information was given about these hypothetical individuals.

**THE STUDY DISCOVERED THAT PARTICIPANTS FELT THE "SUBSTANCE ABUSER" WAS:**

- less likely to benefit from treatment
- more likely to benefit from punishment
- more likely to be socially threatening
- more likely to be blamed for their substance related difficulties and less likely that their problem was the result of an innate dysfunction over which they had no control
- they were more able to control their substance use without help

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## Opioid Stigma

- Lowers the rate of patients who will seek help/treatment
- Patient's feeling scared, depressed, angry and upset
- **Inadequate** pain management
- Lack of caring conversations and relationship building
- Premature discharge and **neglect**

*Studies also show many nurses feel **guilt** and **shame** regarding their own professionalism and these patient/nurse interactions.*

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## Regardless of their past **ALL** patients have a right to:

- Help and treatment
- Adequate pain control
- Caring conversations and relationship building
- Appropriate and safe treatment
- A feeling of mutual trust and non-judgment

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To all the people who have lost their lives to addiction  
and those that try to prevent further losses.

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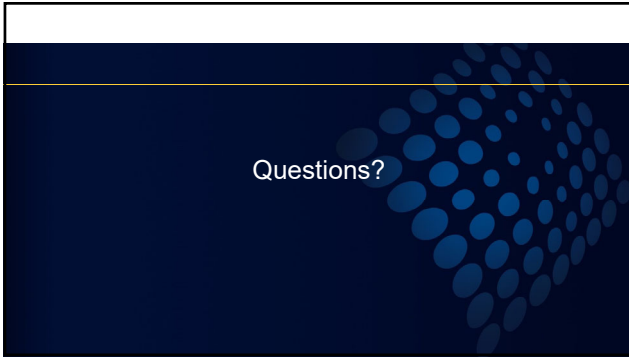
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Questions?

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