SEARCH AND RESCUE ESSENTIALS

TOOLS & RESOURCES TO HELP NAVIGATE THE OPIOID CRISIS

A FACT SHEET FOR PRESCRIBERS

 \rightarrow In 2018, 185 people died every day in the U.S. from drug overdose.¹ Our nation is suffering from a public health crisis, and prescribers can be part of the solution. Brought to you by Partnership to End Addiction, Search and Rescue is a prescriber education campaign operating on a grant from the US Food and Drug Administration (FDA)* with the sole purpose of providing healthcare professionals with the tools and resources they need to help patients with prescription drug misuse, abuse and addiction.

This fact sheet is designed to give you, as a prescriber, an overview of some key tools and resources to help reduce the misuse and abuse of opioids and other prescription medications in your practice.

FROM 2000-2018, OVER 750,000 PEOPLE LOST THEIR LIVES TO DRUG OVERDOSES. THIS STARTLING INCREASE IN OVERDOSE DEATHS WAS DRIVEN, IN PART, BY OVERDOSES FROM PRESCRIPTION OPIOID PAIN RELIEVERS.²



CONTINUING EDUCATION FOR PRESCRIBERS

Research has shown that many healthcare prescribers don't receive formal education in treatment with opioids.

→www.searchandrescueusa.org/supportforyourpractice



You can obtain Continuing Medical Education (CME) credits in these areas that are compliant with the FDA's Risk Evaluation and Mitigation Strategies (REMS) for opioids, many at no cost to you.

→ www.er-la-opioidrems.com/lwgUl/rems/training.action



The Centers for Disease Control and Prevention (CDC) 2016 guidelines on prescribing opioids for chronic pain may also help you make informed decisions about pain treatment for adult patients in primary care settings.

→ www.cdc.gov/drugoverdose/providers/index.html



IDENTIFYING PATIENTS AT RISK FOR OPIOID MISUSE, ABUSE, OR ADDICTION

To identify patients at higher risk of substance use disorders, screenings and brief clinical interventions can be effective. Patients may include those who also have mental health issues.

 \rightarrow www.samhsa.gov/disorders/co-occurring#primary-care

SCREENING, BRIEF INTERVENTION, AND REFERRAL TO TREATMENT (SBIRT)

Provides timely intervention and treatment to people with substance use disorders and those at risk of developing these disorders:

 \rightarrow www.samhsa.gov/sbirt





PRESCRIPTION DRUG MONITORING PROGRAMS (PDMPs)

Prescription Drug Monitoring Programs (PDMPs), which are state-run electronic databases, track controlled prescription drugs prescribed and dispensed to patients. These programs were created to monitor prescription and pharmacy data for instances of abuse or diversion. PDMPs can help track patients at high risk of substance misuse and those who would benefit from early interventions by providing pharmacists and prescribers data on the controlled substance prescription history of these patients.

→ www.searchandrescueusa.org/monitoryourpatients

EFFECTIVE ALTERNATIVES TO OPIOID THERAPY

Opioids are not recommended as first-line or routine therapy for chronic pain. Safer, non-opioid treatments, including medications and alternative therapies, can often provide relief from chronic pain, including low back pain, migraines, neuropathic pain, osteoarthritis, and fibromyalgia.



www.cdc.gov/drugoverdose/pdf/nonopioid_treatments-a.pdf

MEDICATION-ASSISTED TREATMENT OPTIONS

Medication-assisted treatment (MAT) combines behavioral therapy and medications to treat substance use disorders. The following medications are approved to treat opioid use disorders:

→ www.samhsa.gov/medication-assisted-treatment



NALOXONE TO PREVENT OVERDOSE DEATHS

Naloxone is an opioid agonist approved by the Food and Drug Administration (FDA) for use in preventing overdose by opioids, including morphine, heroin, and oxycodone. It can be administered by a family member, friend, or healthcare professional when a patient is showing signs of opioid overdose. The medication can be given by intranasal spray, as well as by intramuscular, subcutaneous, or intravenous injection.



REFERRING YOUR PATIENT TO TREATMENT

When a patient has been identified as misusing or addicted to prescription pain relievers, you may wish to consult a specialist in pain management or addiction medicine—or to provide the patient with options for substance use treatment. These can be found in the:

Substance Abuse and Mental Health Services Administration (SAMHSA) Treatment Locator:

→ https://findtreatment.gov/

SAFE STORAGE AND DISPOSAL OF OPIOID MEDICATION

Explain to your patients the importance of safe storage of medication at home to prevent its being misused by others, especially teens and young adults, and proper disposal of unused medication. \rightarrow www.drugfree.org/article/secure-dispose-of-medicine-properly/



WHAT CAN YOU DO TO MAKE A DIFFERENCE?³

- 1. Start by prescribing non-opioid pain relievers whenever possible.
- If opioids appear to be necessary, begin with the lowest effective dosage and a short-term prescription.
 - 3. Check your state's PDMP to monitor your patient's prescribing activity.
- To avoid greater risk of patient death, don't prescribe benzodiazepines along with opioids.
- 5. Use the other resources available through Search and Rescue.

References: 1. Hedegaard H, Miniño AM, Warner M. Drug overdose deaths in the United States, 1999–2018. NCHS Data Brief, no 356. Hyattsville, MD: National Center for Health Statistics. 2020. 2. Centers for Disease Control and Prevention: Understanding the Epidemic. https://www.cdc.gov/drugoverdose/epidemic/index.html. Accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention: https://www.cdc.gov/drugoverdose/epidemic/index.html. Accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html. Accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html. Accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html. Accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html.accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html.accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html.accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html.accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drugoverdose/epidemic/index.html.accessed March 22, 2018. 3. Why guidelines for primary care providers? Centers for Disease Control and Prevention website: https://www.cdc.gov/drug

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