

RISK FOR OPIOID OVERDOSE

IDENTIFYING AT-RISK PATIENTS IN YOUR
PRACTICE HIDDEN IN PLAIN SIGHT

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What is the profile of someone at risk for overdose? For many, the perception of overdose risk is tied to someone who is an injection drug user, someone with an opioid use disorder that takes more than they can handle, or someone who unknowingly encounters a drug laced with dangerous levels of fentanyl. Few would dispute that these individuals should have ready access to the opioid reversal agent naloxone. While these are accurate profiles of individuals at risk, is the profile too narrow and biased with misconceptions?

The 2016 CDC Guideline for Prescribing Opioids for Chronic Pain recommends co-prescribing naloxone for patients at risk for overdose, including patients with a history of overdose or substance use, patients taking benzodiazepines, and patients taking ≥ 50 morphine milligram equivalents (MMEs) of opioids daily. Yet, in a March 24, 2020 CME Outfitters Risk Evaluation and Mitigations Strategies (REMS) webcast, among 477 internists, primary care providers, nurse practitioners, and PAs, 73% co-prescribed naloxone in patients receiving high dose opioids (≥ 50 MME/day) less than 50% of the time. Thirty seven percent never co-prescribed naloxone in this patient population.

The objective of this virtual symposium is to raise awareness about the risk of overdose among patients with chronic pain in everyday practice and actionable changes to practice that are needed to mitigate that risk.

FACULTY

Mark S. Gold, MD

ASAM's Annual Lifetime Achievement John P. McGovern Award & Prize Winner
Adjunct Professor of Psychiatry
Washington University School of Medicine
St. Louis, MO
17th University of Florida Distinguished Alumni Professor
Gainesville, FL

Steven Stanos, DO

Medical Director, Swedish Health System
Pain Medicine and Services
Seattle, WA
Past President, American Academy of Pain
Medicine

TARGET AUDIENCE

Physicians, PAs, nurse practitioners, and pharmacists

COMMERCIAL SUPPORT

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LEARNING OBJECTIVES

- Recognize the distinct patient profiles of individuals at risk of opioid overdose
- Initiate discussions about overdose risk with chronic pain patients prescribed high dose opioids (≥ 50 MME)
- Co-prescribe and counsel chronic pain patients on high dose opioids (≥ 50 MME) who are at risk for overdose about appropriate use of naloxone

The following learning objectives pertain only to those requesting CNE or CPE credit:

- Recognize the distinct patient profiles of individuals at risk of opioid overdose
- Explain how to initiate discussions about overdose risk with chronic pain patients prescribed high dose opioids (≥ 50 MME)
- Identify chronic pain patients on high dose opioids (≥ 50 MME) who are at risk for overdose that may benefit from a co-prescription for naloxone.

ACCREDITATION INFORMATION

CME Credit (Physicians): CME Outfitters, LLC, is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

CME Outfitters, LLC, designates this live activity for a maximum of .75 *AMA PRA Category 1 Credit(s)*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Note to Physician Assistants: PAs may claim a maximum of .75 Category 1 credits for completing this activity. NCCPA accepts *AMA PRA Category 1 Credit*[™] from organizations accredited by ACCME or a recognized state medical society.

ABIM/MOC Credit: Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to .75 MOC points in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

Learning Format: Live activity

ABPN MOC: ABPN Diplomates may select any CME activity relevant to their practice to count towards ABPN MOC requirements.

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MIPS Improvement Activity: This activity counts towards MIPS Improvement Activity requirements under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). Clinicians should submit their improvement activities by attestation via the CMS Quality Payment Program website.

CBRN Credit (Nurses): Provider approved by the California Board of Registered Nursing, Provider Number CEP 15510, for .75 contact hour.

Note to Nurse Practitioners: Nurse practitioners can apply for *AMA PRA Category 1 Credit*[™] through the American Academy of Nurse Practitioners (AANP). AANP will accept *AMA PRA Category 1 Credit*[™] from organizations accredited by the Accreditation Council for Continuing Medical Education. Nurse practitioners can also apply for credit through their state boards.

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Adjunct Professor of Psychiatry
Washington University School of Medicine
St. Louis, MO
17th University of Florida Distinguished Alumni Professor
Gainesville, FL

BIOGRAPHY

Dr. Mark S. Gold is a teacher of the year, translational researcher, author, mentor and inventor best known for his work on the brain systems underlying the effects of opiate drugs, cocaine and food. He has worked as an Advisor to many White House Drug Czars, White House's, NIDA and NIMH Directors over his 40+ year career. He is an author and inventor who has published over 1000 peer reviewed scientific articles, texts, and practice guidelines. This pioneering work started with detoxification studies using clonidine and lofexidine as a non-opiate detox followed by oral Naltrexone at Yale in the late 70s and continued at the University of Florida. Gold has translated opioid studies using mouse, rat, non-human primate models before developing his opioid withdrawal hypothesis with his Yale colleagues. He then, led the first studies to demonstrate non-opioid treatment efficacy for alpha-2 agonists. He also led rapid detoxification and clonidine to naltrexone studies in the late 70s and early 80s. Gold, trying to find patients who would take oral Naltrexone, began his studies of Impaired Health Professionals and employees in health and safety occupations.

Gold has been awarded a number of national awards for his research including the Lifetime Achievement Award of the National Association of Addiction Treatment Professionals, Foundations Fund Prize (APA), PRIDE Lifetime Achievement Award, DEA 30 Years of Service Pin, the McGovern Award for Lifetime Achievement (ASAM-ABAM 2015), National Leadership Award (NAATP), DARE Lifetime Achievement Award, Public Relations Society's Silver Anvil Award, China Academy of Sciences, and DARE awards for his career in research and prevention (2015). More recently, he received the PATH Foundation's Lifetime Achievement Award (2016) as one of the "fathers" of addiction medicine presented to him by President Obama's White House Drug Czar Michael Botticelli. He was awarded Distinguished Alumni Awards at Yale University, University of Florida, and Washington University in St Louis and the Wall of Fame at the U.F. College of Medicine.

Gold was a Professor, Eminent Scholar, Distinguished Professor, Distinguished Alumni Professor, Chairman, and Emeritus Eminent Scholar during his 25 years at the University of Florida. His work is widely cited by his peers. It includes citation classics in cocaine neurobiology, opioid addiction neurobiology and treatment, food, and process addictions. He proved cocaine was misclassified as safe or the champagne of drugs leading to revision in the DSM 3 and diagnosis of addiction. He has been called a groundbreaking researcher, father of medication assisted recovery, the first to translate rat experiments into theory and

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treatments for human addicts, mentor of the next generation of addiction researchers and clinicians. Working closely with Bart Hoebel at Princeton University, Gold helped develop the food addiction theory he posited in the 80s. With Nicole Avena, he worked on sugar self administration models for hedonic overeating and developed new treatments for overeating and obesity. Kelly Brownell and Gold's Oxford University Press's *Food Addiction* has been widely recognized as ground-breaking. While working on food and drug-like reinforcement systems has been an important part of his work for 30 years, he has also worked on dual disorders, Anorexia and Bulimia Nervosa. Dr. Gold worked closely with Al Rhoton and Bill Luttge to establish the UF Brain Institute. He was an original member of the McKnight Brain Institute and Director working to develop programs in Psychiatry, Addiction, Neurology, and Neurosurgery.

Since his retirement as a Director of the McKnight Brain Institute, Chairman, Distinguished Professor, and a full-time academic in 2014, Gold has continued his teaching, mentoring, research, and writing. He finished his 5 year State Department grant on opium smokers and the effects of second and third hand opium on children in Afghanistan. He has worked on de novo clinical addiction programs at the Medical College of Georgia, Northwestern, U.F. and Tulane Lakeview Health. Dr. Gold regularly lectures at National & International Meetings, Medical Societies, Grand Rounds around the USA and at international and national scientific meetings on his career, bench-to-bedside science in eating disorders, obesity, and addictions. Recently, he has given a Keynote speech at at the National Opioid Summit, Florida Opioid Summit, and for the DEA-DOJ. He speaks regularly at Medical Schools across the USA, most recently at Yale University, Mayo Clinic, Tulane, Washington University in St Louis, Stanford, U Conn, UCSF, Emory, Harvard-McLean-Borden Cottage, and UNC. He has given recent Keynote Addresses at American College of Psychiatrists, CADCA, ASAM, NAATP, APA, and Biological Psychiatry as well as a many States, Medical and Psychiatric Associations dealing with the opioid epidemic.

He is an Adjunct Professor in the Department of Psychiatry at Washington University and an active member of the Clinical Council at the Washington University School of Medicine's Public Health Institute. He has Wash U mentees and works with them regularly. He is the Director of Research for the DEA Educational Association, working closely with DEA and moderating their quarterly educational events broadcast from DEA Headquarters around the world.

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Steven Stanos, DO

Medical Director, Swedish Health System Pain Medicine and Services
Seattle, WA
Past President, American Academy of Pain Medicine

BIOGRAPHY

Dr. Stanos currently serves as Medical Director of Swedish Health System Pain Medicine and Services in Seattle, Washington. Aside from directing pain management services for the hospital system, he also leads Swedish's pain rehabilitation center, Functional Restoration, an integral part of the pain medicine continuum of care. In addition to his work with Swedish Health System, he is active with committees work at Providence St. Joseph Health related to the system integration of pain management including primary and specialty care. Prior to joining Swedish and Providence he served as medical director of the Center for Pain Management at the Rehabilitation Institute of Chicago (RIC) Northwestern University Medical School from 2002-2014, and served as an Assistant Professor at Northwestern University Feinberg School of Medicine and program-co chair of the multidisciplinary pain fellowship.

Dr. Stanos is board certified in physical medicine and rehabilitation and pain medicine by the American Board of *Pain Medicine* and by the American Board of Anesthesia.

Dr. Stanos is a Past President of the American Academy of Pain Medicine and serves on the Board of Directors of the American Board of Pain Medicine. He served as a panel member on the Service Delivery and Reimbursement work group for the National Pain Strategy, an invited consultant to the CDC for the CDC Opioid Guideline for Prescribing Opioids for Chronic Pain, and as a work group member for Healthy People 2020 and Healthy People 2030. He is active with the American Academy of Physical Medicine and Rehabilitation and has served as the co- chair of education for the Pain and Neuromuscular Council.

Dr. Stanos' work also includes ongoing educational initiatives for primary care, pain medicine, and physical medicine specialists around the United States and abroad. Dr. Stanos has published numerous scientific articles and book chapters related to pain management. He has been involved in the development and publication of treatment guidelines related to rehabilitation approaches for chronic pain and low back pain conditions. He also serves on the editorial board for the journal *Pain Medicine* and as a reviewer for other pain and rehabilitation journals.

A Mayday Foundation Advocacy fellow in 2013, Dr. Stanos' advocacy has continued to focus on increasing awareness and access for inter-disciplinary biopsychosocially-based pain care for patients suffering with chronic pain. In 2014, the University of Washington Department of Pain Medicine awarded Dr. Stanos with the John J. Bonica, MD lecture. He has appeared on CNN, National Public Radio, Fox News, regional print, and television news covering various topics related to pain medicine and pain rehabilitation.

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Dr. Stanos reports that he is a consultant for Eli Lilly and Company; Pfizer Inc.; and Sanofi.

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