

INDIAN HEALTH SERVICE (IHS) NATIONAL COMMITTEE ON HEROIN, OPIOIDS, AND PAIN EFFORTS (HOPE)

Indian Health Care: Ensuring a Coordinated, Holistic Response to the Opioid and Heroin Epidemic

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The Indian Health Service Launches New Opioids Website

The Indian Health Service launched a new [IHS opioids website](http://www.IHS.gov/opioids) to share information and increase communication surrounding opioids with key stakeholders across Indian Country. The new site is available at www.IHS.gov/opioids.

The IHS opioids website provides patients, health care providers, tribal leaders, tribal and urban program administrators, and other community members with opioid related resources in one location, allowing for quick and easy access to information. The new website includes details on approaches to preventing opioid abuse, proper pain management and recovery tools, how to respond to an opioid overdose, funding opportunities, and much more. The IHS is committed to combating the opioid crisis; this new website is one of many positive steps IHS is taking to increase awareness and drive discussion on promising practices that may reduce opioid misuse.

The IHS chartered the [National Committee on Heroin, Opioids & Pain Efforts](#) in March of 2017. This committee has created [online and in-person training courses](#) to expand workforce capacity and community awareness surrounding opioids, as well as worked to expand access to naloxone for trained first responders serving in our communities. There has been progress in our tribal communities, but we are aware of the remaining challenges and opportunities to work together to expand access to treatment, support long-term recovery, and enhance prevention efforts.

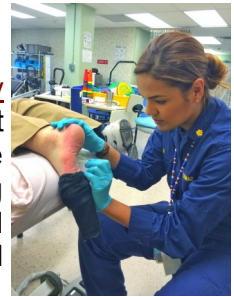
The IHS remains committed to our mission of raising the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. The importance of collaborating and consulting with tribes to develop a comprehensive plan for addressing the opioid crisis in Indian Country is paramount. We hope that this new expanded opioids website will help us work towards addressing the opioid crisis by sharing information, announcements, training opportunities, and the latest updates surrounding best and promising practices across the Indian health care system.

HOPE Listserv

Subscribe to the HOPE Listserv to receive timely announcements and newsletter releases, go [here](#) and search "IHS National Committee on Heroin, Opioids, and Pain Efforts"

Physical Therapy: Non-Pharmacological Alternative to Treat Chronic Pain

The IHS recently released an update to the Indian Health Manual [Chapter 30 Policy](#) on Chronic Non-Cancer Pain. It describes the multidisciplinary Pain Management Team to include representation from physical therapy (PT). High quality evidence supports physical therapy interventions as effective at reducing pain and improving function in particular for patients with hip and knee osteoarthritis, low back pain, and fibromyalgia. CDC guidance states that nonpharmacologic therapy, such as physical therapy, is preferred for chronic pain management.



Physical therapy interventions can have a positive impact toward the prevention of chronic opioid dependency and proper pain management. New evidence exists that demonstrates early access to physical therapy for treatment of low back pain significantly lowered the probability of the patient receiving an opioid prescription. The combination of appropriate pharmacological and non-pharmacological treatment modalities may improve health outcomes for patients.

The physical therapist will perform a patient assessment and develop a rehabilitative plan appropriate to the patients' personal and subjective experiences of pain with the goal of improving function and the quality of life of the patient.

A traditional physical therapy plan of care may include primary PT interventions such as exercise prescription, manual therapy, electrical stimulation, dry needling (see photo above), cold and hot modalities, and ultrasound. Some PT's have received advanced certification in pain management and may incorporate newer pain neuroscience principles such as graded motor imagery programs or mindfulness exercises. A white paper published by the American Physical Therapy Association further defines advances into other modes of treatment such as stress management, sleep hygiene, and pain neuroscience education to decrease opioid use. As IHS clinical professionals are escalating the practice of Trauma Informed Care, physical therapy interventions will also be inclusive of multimodal team-based and relationship centered care to produce the most optimal patient outcomes.

Remember to reach out to your physical therapy staff and [#ChoosePT](#) when assisting your patients through their chronic pain experience.

For a full list of references, please contact HOPE Communications Lead: [LT Kristin Allmaras](#)

Syringe Services Programs

[Syringe services programs](#) (SSPs) provide sterile syringes and other prevention materials. These programs serve as a harm reduction strategy to reduce the risk of transmitting infectious diseases, such as HIV and Hepatitis C, and reduces needle stick injuries among community members and law enforcement personnel. SSPs provide an opportunity to offer available health screenings, immunizations, educational materials, and referrals to substance use disorder treatment programs. SSPs have been referred to as syringe exchange programs, however they can be more inclusive and deliver other services such as Medication Assisted Treatment, counseling, family services, and Hepatitis C and HIV treatment including pre- and post-exposure prophylaxis¹. SSPs provide an integrative, evidence-based, and cost-effective approach to reducing transmission of infectious diseases while offering medical, social and mental health services.



Are YOU due?

IHS [policy](#) requires specific opioid prescriber training. Renewing IHS prescribers can access the [refresher](#) course. The course takes about 90 minutes to complete.

1. CDC. Syringe Service Programs. <https://www.cdc.gov/hiv/risk/ssps.html>

