

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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INCREASING ACCESS TO NALOXONE, INTEGRATED PAIN MANAGEMENT
CARE: A REHAB SPECIALIST PERSPECTIVE, AND OPIOID STEWARDSHIP**



IHS Pharmacists: Increasing Access to Naloxone

Prescription opioids were involved in more than 35% of all opioid overdose deaths in 2017. DHHS, in an effort to combat the crisis, has recommended co-prescribing naloxone to patients who are deemed at high-risk for an overdose. IHS pharmacists have responded to this call to action!

Alaska Native Medical Center (ANMC) launched a pharmacist driven naloxone protocol in February 2017. The protocol allows pharmacists to identify patients in need of naloxone and provide the medication per protocol, bypassing the need for a provider visit. The protocol details criteria to identify patients at risk of opioid overdose, which resulted in almost doubling the number of naloxone prescriptions from January to February 2017. By training over 75 pharmacists & increasing provider education on campus, ANMC dispensed over 200 naloxone prescriptions from December 2017 to November 2018.

Gallup Indian Medical Center (GIMC) pain clinic pharmacists started educating the community about opioid overdose in May 2015. Pharmacists were trained to provide naloxone education to chronic opioid patients, caregivers, and any other interested individuals. Pharmacists trained GIMC medical and administrative staff and trained local first responders. Since pharmacist involvement began, 470 patients completed naloxone training, 432 received naloxone kits, and 149 obtained at least one refill.

At Lawton Indian Health (LIH), a team of health care providers created a multidisciplinary oversight team of physicians, pharmacists, behavioral health specialists, and physical therapists to oversee opioid prescribing and initiate appropriate de-escalation management. Pharmacists implemented educational tools and dispensed naloxone during provider visits. To date, over 200 patients have been educated at LIH and over 150 patients have received a naloxone kit. The service unit also offers naloxone kits to tribal law enforcement and emergency personnel.

IHS pharmacists are combating the opioid crisis by implementing co-prescribing of naloxone to save lives. On average, patients see their pharmacist 35 times annually compared to only four primary care provider visits per year. Given this, pharmacists are in a prime position to take a proactive role in this harm reduction strategy within their facilities.

Find more information [about co-prescribing naloxone!](#)

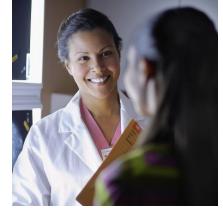
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Visit: www.ihs.gov/opioids and www.ihs.gov/painmanagement for more information

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Integrated Approaches to Optimize Pain Management Outcomes: A Rehab Specialist Perspective

The Pain Management Best Practices Inter-Agency Task Force [Recommendations](#) were recently released. These recommendations emphasize the importance of interdisciplinary, multimodal approaches to chronic pain management that focus on patients' underlying medical condition and co-morbidities. The IHS is currently creating workforce development strategies to increase access to non-pharmacologic approaches to pain management.



The Therapist Professional Advisory Committee convened a Task Force to create a [white paper](#) that focuses on current evidence for management of chronic pain.

This [white paper](#) concludes that an immediate impact can be made on the opioid crisis through improved management of acute musculoskeletal conditions utilizing multimodal, conservative management and non-opioid pharmacological interventions. Recommendations include:

- A public paradigm shift in understanding pain and safe pain management through mass media and direct education by healthcare providers to patients
- Improved access to integrated care models to bring Physical Rehabilitation Specialists to the forefront in management of persistent pain
- Healthcare policy revision and a change in practice patterns that restore the therapeutic alliance between healthcare providers and patients
- Changes to healthcare professional training programs to teach pain and pain management from a biopsychosocial perspective

The opioid crisis took years to evolve to a national emergency, and this paper highlights current evidence that provides hope to providers and patients that relief is on the horizon. The biopsychosocial model of pain management goes beyond the biomedical model to include an acknowledgment of anatomy, physiology & pathoanatomy in persons with persistent pain in addition to psychological factors (thoughts, emotions, and behaviors) and social considerations (work, culture, and religion) which are known to have a significant role in a person's pain experience.

- Additional resources are available on the [pain management](#) and [opioids](#) websites
- Consider working with the [NIH Library](#) to obtain a free copy of the white paper

Opioid Stewardship: Implementing a Program

Opioid Stewardship is a key part of IHS's overall strategy to improve outcomes for patients diagnosed with chronic pain syndrome or opioid use disorder. Effective opioid stewardship strategies emphasize safe opioid prescribing, team-based care, leadership support, are action-oriented,



and use data to inform decisions. The Bemidji Area IHS has created a [workbook](#) that can serve as a template for local service unit opioid stewardship implementation.

Find additional [information for starting an opioid stewardship program](#).

- For more information, visit the HOPE Committee's [pain management](#) and [opioids](#) websites.

REGISTER NOW:

Bemidji Area Pain Skills Intensive,
Medication Assisted Treatment &
Auricular Acupuncture Live Training!

The IHS is expanding access to non-pharmacologic approaches to pain management in partnership with the Defense Veterans Center for Integrated

Pain Management. I/T/U clinicians can attend a 4-hour auricular acupuncture certificate training course in St Paul, MN, November 8th. Participants will learn more how to apply this pain management treatment option in a primary care setting. To register, [go the registration page](#) and enter the survey code *psi11062019*.