Reducing stigma associated with opioid use disorder through narrative: Crystal's story

Melanie Gordon

Crystal Pfingston

Follow this and additional works at: https://institutionalrepository.aah.org/advocategme
Grand Rounds
Thursday, February 2nd 12:00-1:00

Reducing Stigma Associated with Opioid Use Disorder through Narrative: Crystal’s Story
Dr. Gordon will discuss the progression of opioid use disorder over the decades, treatment options and how stigma negatively impacts patients’ healthcare.

Advocate Christ Medical Center/Robert Stein Auditorium & Zoom
Meeting ID: 708 664 8873
Passcode: 279124
Join Here!

Melanie Gordon, MD FACE
Population Health Assoc. Medical Director of Health Equity, EPH
Program Director, Internal Medicine Residency

Advocate Aurora Health®
Reducing Opioid Use Disorder Stigma with Narrative:
Crystal’s Story

Melanie Gordon MD FACP
Population Health Assoc. Medical Director, Health Equity, AAH
Program Director, IM Residency Program, ACMC
Associate Professor of Clinical Medicine, UIC

Crystal Pfingston
Peer Recovery Support Specialist
I have no disclosures
Objectives

• Provide overview of Opioid Epidemic Data

• Describe how opioid use disorder bias negatively impacts care patients

• Explore ways to reduce stigma in the healthcare setting
The Opioid Epidemic in America

Opioid Misuse & Addiction in the United States

Data from the U.S. National Institute on Drug Abuse indicates:

- Roughly 21-29% of patients prescribed opioids for chronic pain misuse them
- Between 8-12% develop an opioid use disorder
- An estimated 4-6% who misuse prescription opioids transition to heroin
- Approximately 80% of people who use heroin first misused prescription opioids

Relationship between Nonmedical Prescription Opioid Use and Heroin Use

Wilson M. Compton, M.D., M.P.E., Christopher M. Jones, Pharm.D., M.P.H., and Grant T. Baldwin, Ph.D., M.P.H.

Nonmedical Use of Prescription Opioids and Heroin during the Previous Year among Noninstitutionalized Persons 12 Years of Age or Older, 2002–2014.
Opioid Overdose

Cook County Data 2020

~1789 persons died from opioid related overdose
1300 in Chicago
487 in suburban Cook County

Gender
Men (77%) Women (23%)

Age
Older (45-64) 50%
Younger (15-24) 5%

Ethnicity
Black 48%
White 35%
Latino 14%

Drug detected at time of death
Fentanyl involved: 86.2%
Heroin involved: 49%
Opioid pain reliever: 8.4%
Methadone involved: 10.1%

Data Source: Cook County Department of Public Health: 2020 Opioid Joint Report for Cook County
Our Impact at ACMC

Number of patients assessed within ACMC per year:

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td># of patients screened for Substance Use Disorder</td>
<td>596</td>
<td>1869</td>
<td>1959</td>
</tr>
<tr>
<td># of positive screens for Opioid Use Disorder (OUD)</td>
<td>123</td>
<td>362</td>
<td>381</td>
</tr>
<tr>
<td># of positive screens for non-OUD Substance Use Disorder</td>
<td>472</td>
<td>1490</td>
<td>1570</td>
</tr>
<tr>
<td># of positive screens for Alcohol Use Disorder</td>
<td>381</td>
<td>1194</td>
<td>1297</td>
</tr>
<tr>
<td># of brief interventions for OUD</td>
<td>102</td>
<td>287</td>
<td>348</td>
</tr>
<tr>
<td># of brief interventions for non-OUD Substance Use Disorder</td>
<td>399</td>
<td>1254</td>
<td>1460</td>
</tr>
<tr>
<td># of brief interventions for Alcohol Use Disorder</td>
<td>329</td>
<td>992</td>
<td>1215</td>
</tr>
<tr>
<td># of treatment referrals for Opioid Use Disorder (OUD)</td>
<td>53</td>
<td>120</td>
<td>102</td>
</tr>
<tr>
<td># of treatment referrals non-OUD Substance Use Disorder</td>
<td>150</td>
<td>189</td>
<td>102</td>
</tr>
<tr>
<td># of treatment referrals Alcohol Use Disorder</td>
<td>120</td>
<td>136</td>
<td>105</td>
</tr>
<tr>
<td># of assessments for MAT for OUD</td>
<td>31</td>
<td>103</td>
<td>120</td>
</tr>
<tr>
<td># of buprenorphine inductions</td>
<td>7</td>
<td>76</td>
<td>104</td>
</tr>
<tr>
<td># of naloxone kits distributed/prescribed</td>
<td>78</td>
<td>245</td>
<td>323</td>
</tr>
</tbody>
</table>

Data Source: Advocate Christ Medical Center: Chemical Dependency Team 2022
Severe Opioid Use Disorder (Addiction) Defined

Addiction is a complex condition, a brain disease manifested by compulsive substance use despite harmful consequence. People with addiction (severe substance use disorder) have an intense focus on using a certain substance(s), such as alcohol or drugs, to the point that it takes over their life.
Stigma around opioid use disorder creates barriers for people to seek treatment and access care. Many patients with opioid use disorder have a high likelihood of readmission, and the underlying cause of patients’ opioid use disorder is often not addressed.

Result: less than 20% of pts have access to treatment
2018: ~40,000 DATA waiver

2022: ~120,000 w/ DATA waiver
Characteristics and prescribing practices of clinicians recently waived to prescribe buprenorphine for the treatment of opioid use disorder

Christopher M. Jones & Elinore F. McCance-Katz
Substance Abuse and Mental Health Services Administration, Rockville, MD, USA

### Percentage clinical time spent treating patients with addiction

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
<th>Median (IQR)</th>
<th>CI (95%)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prescribed buprenorphine since obtaining DATA waiver</td>
<td>No</td>
<td>1034 (24.5)</td>
<td>2510 (56.9)</td>
<td>&lt; 0.001</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>3181 (75.5)</td>
<td>1779 (74.8)</td>
<td>&lt; 0.001</td>
</tr>
</tbody>
</table>

### Type of buprenorphine product(s) used

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
<th>Median (IQR)</th>
<th>CI (95%)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single-entity buprenorphine</td>
<td>1761 (55.6)</td>
<td>1010 (54.9)</td>
<td>751 (54.0)</td>
<td>0.094</td>
</tr>
<tr>
<td>Buprenorphine/ naloxone combination</td>
<td>2988 (93.7)</td>
<td>1668 (94.0)</td>
<td>1300 (93.4)</td>
<td>0.465</td>
</tr>
<tr>
<td>Long-acting buprenorphine injection</td>
<td>165 (5.2)</td>
<td>86 (4.8)</td>
<td>79 (5.7)</td>
<td>0.298</td>
</tr>
<tr>
<td>Buprenorphine implant</td>
<td>41 (1.3)</td>
<td>25 (1.4)</td>
<td>16 (1.1)</td>
<td>0.521</td>
</tr>
</tbody>
</table>

### Table 2: Buprenorphine prescribing patterns among clinicians that prescribed buprenorphine since obtaining DATA waiver

<table>
<thead>
<tr>
<th></th>
<th>Overall</th>
<th>Physicians</th>
<th>NPs/PAs</th>
<th>30 Patient limit</th>
<th>100 Patient limit</th>
<th>275 Patient limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of patients in past month</td>
<td>Mean (SD)</td>
<td>26.6 (40.3)</td>
<td>13 (8-18)</td>
<td>10.8 (10.2)</td>
<td>28.4 (24.7)</td>
<td>95.8 (63.8)</td>
</tr>
<tr>
<td></td>
<td>Median (IQR)</td>
<td>13 (3-10)</td>
<td>10 (3-24)</td>
<td>6 (2-20)</td>
<td>25 (10-40)</td>
<td>90 (42-130)</td>
</tr>
<tr>
<td>Average number of patients per month in past year</td>
<td>Mean (SD)</td>
<td>25.9 (17.9)</td>
<td>15.0 (47.2)</td>
<td>13.9 (12.0)</td>
<td>10.8 (10.2)</td>
<td>28.5 (23.9)</td>
</tr>
<tr>
<td></td>
<td>Median (IQR)</td>
<td>15 (6-28)</td>
<td>10 (6-28)</td>
<td>10 (6-28)</td>
<td>8.5 (42-130)</td>
<td>91.8 (58-130)</td>
</tr>
</tbody>
</table>

### Average daily buprenorphine dose prescribed

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
<th>Median (IQR)</th>
<th>CI (95%)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prescribing maximum daily buprenorphine dose &gt; 24mg</td>
<td>80%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

*This table is limited to the 1181 (75.5% of 4210) prescribers who reported prescribing buprenorphine since obtaining a DATA 2000 waiver in 2017. DATA = Drug Addiction Treatment Act; NPs = nurse practitioners; PA = physician assistant; IQR = interquartile range; SD = standard deviation.*
How to Combat Stigma? **EMPATHY**

- Empathy - essential skill to deliver care to patients
- Positively impacts patient safety
- Provides better patient outcomes
- Greater patient satisfaction
- Important in effective communication

"Try and walk together with patients, sharing their emotions, being there to feel their laughter and joy when treatments are right, hold their hands, and walk through their pain and loss." 

Empathy Can Be Taught

- Can be invoked, reawakened, nurtured
- Communication skills
- Active listening
- Self-reflection

- Role model to inspire the learner
- Create a safe space for learner
- Acknowledge and validate
- Incorporate shared decision making

Ways to Reduce OUD Stigma?

- Use AAH resources
- Develop Empathy
- Longitudinal care of patients
- Increase your knowledge based
- Storytelling and personal testimonies
Crystal’s Story

Peer Recovery Support Specialist

Chemical Dependency team since 2019

Person with lived experience
Chemical Dependency Team

• Awarded Grant for Warm Hand off 2019
• Team consists of:
  • CADC's, Social Workers, RN, Peer Support Specialists, Psychiatric Nurse Practitioner, and Physicians
  • Consult for active OUD/SUD upon admission
  • Assist with discharge planning (residential tx, SAIOP, MAT appointments, etc.)
AAH MAT Bridge Clinic

9730 South Western Ave
Suite 326
Evergreen Park, Il
Telephone: 708-346-7340

Medication Assisted Treatment Clinic
Currently open 6 days a week
Same day or next day appointment
Insurance and no insurance accepted
Not open Sundays or Holidays
Our brain may well predispose us to see them as people to be hated or feared. But these same brains allow us to think and feel our way out of that mindset, and to behave with compassion and decency— and as physicians, to do our duty

- Ronald Pies
Resources

- Countering the Opioid Crisis: Time to Act Podcast
- AHA podcast: AHA and Shatterproof tackle opioid use disorder stigma
- Chemical Dependency Team
Questions?