

Lifespan Adopts ED Guidelines to Curb Opioid Misuse and Abuse

PROVIDENCE – As the number of unintentional overdoses involving prescription drugs continues to climb in the U.S. and especially in Rhode Island, emergency medicine physicians from throughout the Lifespan health system are formalizing the way they treat chronic pain to limit opioid medication misuse and abuse.

Lifespan, the state's largest health system, has implemented a formal set of guidelines for its emergency departments at Newport Hospital, The Miriam Hospital and Rhode Island Hospital that sets the stage for treatment of chronic non-cancer pain to limit inappropriate use of opioids and better coordinate care with the patient's primary care physician.

"Deaths from accidental prescription drug overdose and narcotic addiction have become a major public health problem," said **BRIAN ZINK, MD**, chief of emergency medicine at Rhode Island and The Miriam hospitals. "Unfortunately, more people die from opioid medication overdose than from automobile accidents. Just last year, more than 180 Rhode Islanders died from an unintentional overdose, the majority from prescriptions drugs.

He continued, "Every day, coming through the doors of our emergency departments, there are people in pain who need treatment, but also people who are addicted to narcotic medications. Our clinicians have a duty to responsibly care for both groups. For those who are addicted and seeking opioids in the emergency department, prescribing more narcotics is not good care."

Because of the severity of the issue of opioid abuse in Rhode Island (the state is ranked as having the 13th highest drug overdose mortality rate in the country, as well as the highest in New England), the state Department of Health is supportive of the work being done by Lifespan.

"Prescription drug overdose death is the leading cause of premature death in adults in Rhode Island," said **MICHAEL FINE, MD**, director of the Rhode Island Department of Health. "These Lifespan guidelines, along with physician use of the prescription monitoring program every single time they prescribe narcotics and other powerful drugs will go a long way toward stopping this epidemic."

At Lifespan, the decision to move toward a defined guideline began in the emergency department at Newport Hospital. "We watched as more and more people came into our emergency department asking for opioid pain medication. Many of these patients have a very legitimate need for pain relief," said **GLENN HEBEL, MD**, Newport Hospital's chairman of the department of emergency medicine. "Unfortunately, many other patients are not using these medications appropriately, and this can turn into a dangerous or even deadly problem. In the ED, we are at a crossroads for people seeking these medications and it means we are also well positioned to implement guidelines that can really make a difference."

While Newport Hospital worked on its guidelines, the emergency departments at Rhode Island Hospital and The

Miriam Hospital, which are staffed by physicians from University Emergency Medicine Foundation, began working on their own set of guidelines through the efforts of **TOM HARONIAN, MD**, **LIBBY NESTOR, MD**, and **JASON HACK, MD**. Realizing strength came through a system approach, the two groups began working together to develop a single guideline that could be used throughout Lifespan and serve as a model for the state.

The Lifespan Emergency Department Opioid Guideline is for chronic non-cancer pain, and includes limiting the amount of opioid pain medication provided on discharge and encouraging patients to get refills from the provider who ordinarily prescribes the medication rather than the emergency medicine physician. Physicians are also encouraged to refer patients with suspected substance abuse behavior for appropriate treatment and to provide patients with information about the addictive nature and potential misuse of these medications. Emergency physicians are also using Lifespan electronic health records and state prescription monitoring databases to identify patterns of opioid misuse in patients.

Dr. Zink estimates that at the Rhode Island Hospital Anderson Emergency Center and The Miriam Hospital Emergency Department, 15 to 20 patients per day present seeking opioid medications – people who are either addicted to opioids or who want to sell these prescription medications to others. ❖

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