

# E-QUAL EMERGENCY QUALITY NETWORK

Opioid Initiative Wave I

Harm Reduction in the ED



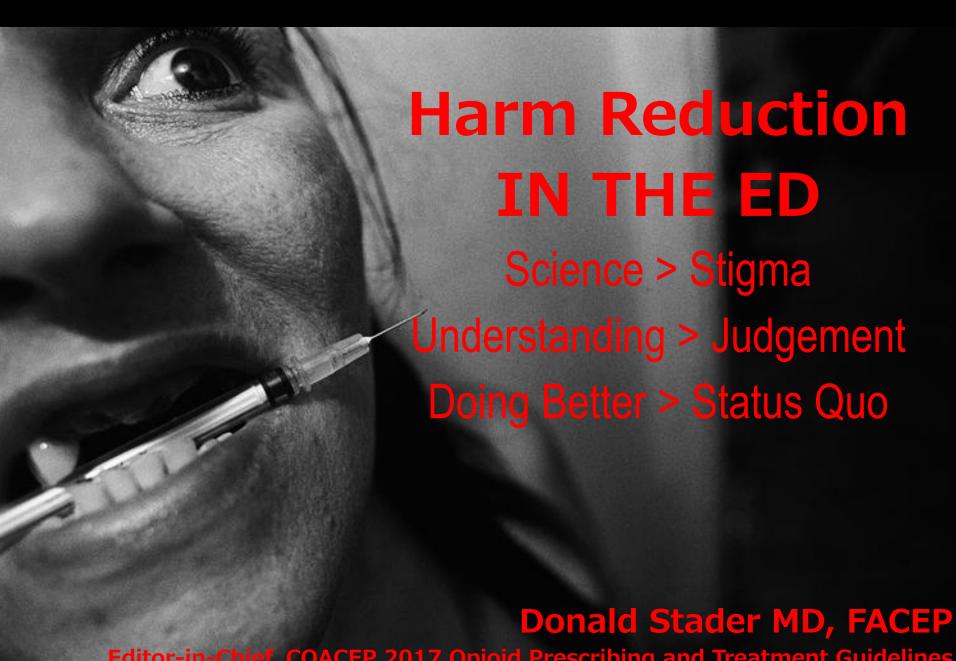




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## No Conflicts of interests to disclose

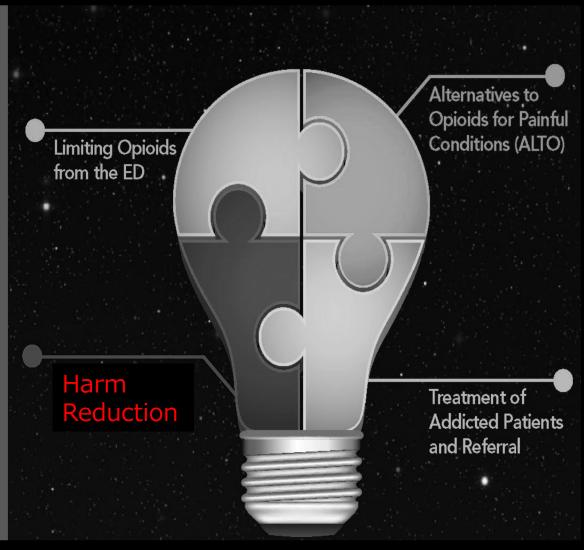
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## COLORADO ACEP

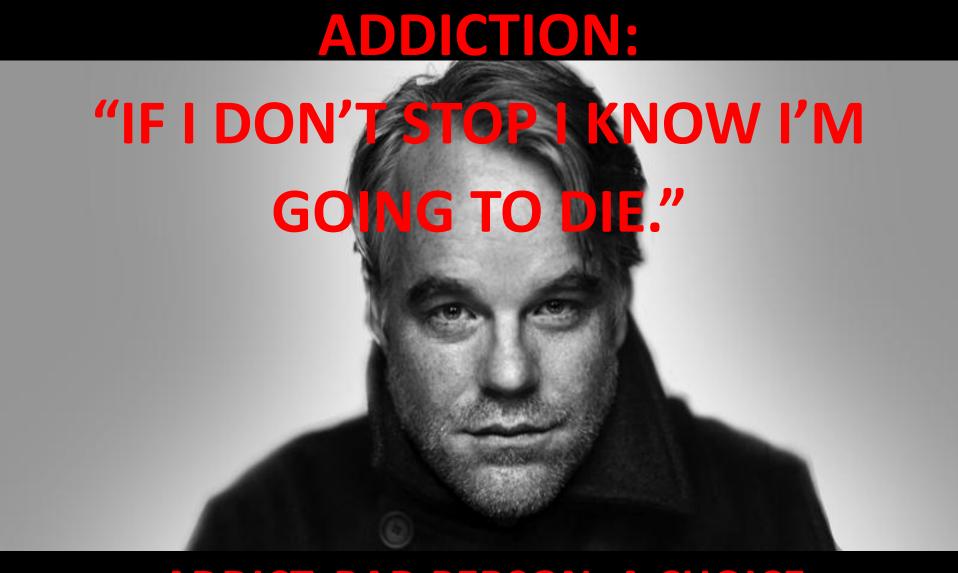
# 2017 Opioid Prescribing & Treatment Guidelines



Confronting the Opioid Epidemic in Colorado's Emergency Departments



http://coacep.org/docs/COACEP\_Opioid\_Guidelines-Final.pdf



ADDICT. BAD PERSON. A CHOICE.

A MORAL FAILING. WASTE OF TIME

#### **HOW DO WE FEEL ABOUT DRUG USERS?**



## **ADDICTION:**

ENDORPHINS
DYNORPHINS
DOPAMINE
REWARD SYSTEM
MALFUNCTION



A MEDICAL DISEASE.

DRUG SEEKING IS COMPULSIVE. DIFFICULT TO CONTROL. ADDICTION > CONSEQUENCE.

PHYSIOLOGIC BRAIN CHANGES RELAPSING & REMITTING.

#### WHAT WE KNOW ABOUT IVD USE:



# Harm reduction is -

PRACTICAL.

Reducing negative consequences.

Respect patients & their choices.

NO Stigma.

Keep Safe and Reduce Risk.

**Until ready for RECOVERY.** 

## HARM REDUCTION EXAMPLES



## WHAT WE SHOULD KNOW?



EVERY EMERGENCY CLINICIAN SHOULD KNOW HOW TO INJECT

HEROIN & IV DRUGS.

STERILE TECHNIQUE. SOUND ADVICE



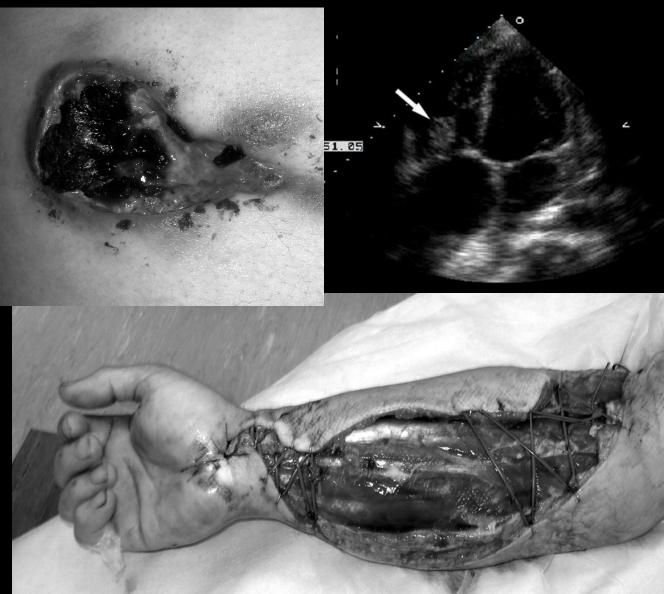


#### PATIENT 2: "I WAS BIT BY A SPIDER"



#### **CONSEQUENCE OF STANDARD CARE...**



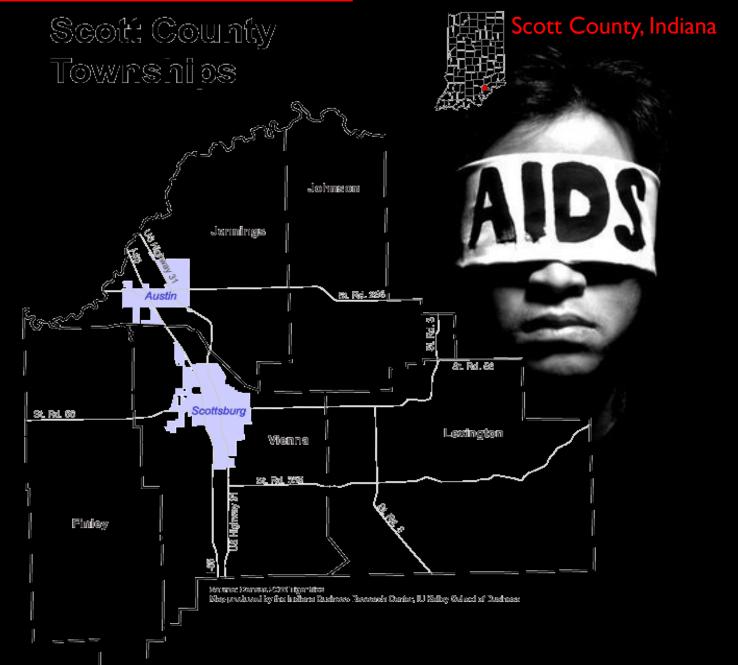


## PATIENT 3: YOUR FAVORITE NURSE. PANICKED. NEEDLE STICK INJURY.

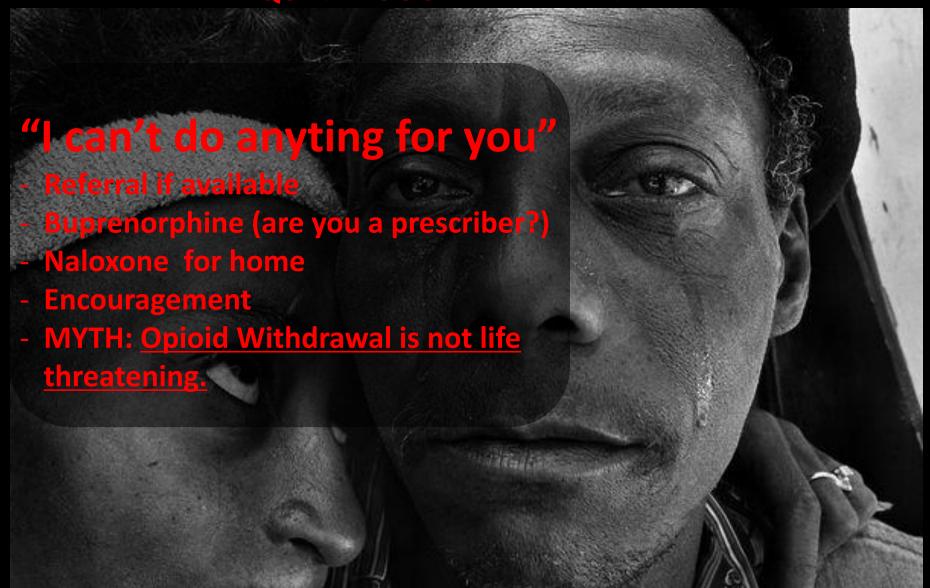




#### **CONSEQUENCE OF STANDARD CARE...**

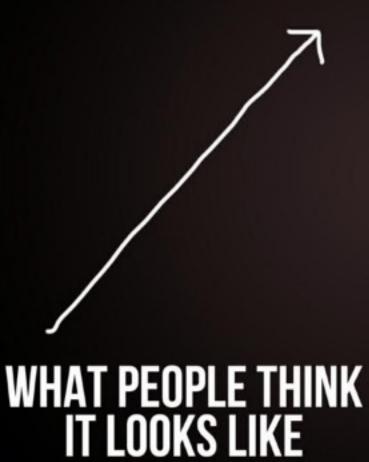


# Pt 4. LONG TERM OPIOID USER. WITHDRAWING. WANTS TO QUIT. BROUGHT BY FAMILY.



# SUCCESS

# SUCCESS



WHAT IT REALLY Looks like

(

# HARM REDUCTION & ED ETHOS – ARE THE SAME – PUT THE PATIENT FIRST. WHAT DO YOU SEE?









#### For More Information

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