Background

- Overdose deaths in the United States reached over 70,000 in 2017, and continue to trend upward.
- Opioid overdoses increased from 6.1 per 100,000 in 1999 to 21.7 per 100,000 in 2017.
- Pennsylvania has the 3rd highest rate of overdose in the United States, with 44.3 per 100,000 in 2017.
- Philadelphia had a rate of 75.4 overdoses per 100,000, with 1,192 overdose deaths 2017.
- Death as a result of an overdose can be prevented with interventions including the administration of an opiate reversal agent such as naloxone.
- Naloxone reverses the respiratory depression effects of opioids.
- Emergency medical treatment may mitigate the acute problem, but underlying addiction persists, maintaining risk for future abuse.
- Patients revived in the field or hospital experience a very high risk of a subsequent overdose.
- 9.9% of resuscitated patients die within one year
- Overdoses and naloxone administration events are strong identifiers of high-risk patients.
- Patients engaged after an overdose event may be successful in breaking the cycle of addiction.

Objective

- Identify organizations targeting patients after an overdose that utilize secondary prevention strategies.
- Identify types of patient engagement strategies.
- Identify Intervention strategies.
- Compare locally available resources in Philadelphia to successful programs nationally.

Process Plan

- Identified programs in U.S. using search terms: “Post overdose care,” “overdose follow up.”
- Included secondary prevention programs for users who experienced an overdose.
- Excluded programs focused solely on primary or tertiary prevention strategies.
- Compiled of patient engagement strategies and best practices of intervention.
- Identified similar resources in Philadelphia, comparing with programs throughout the country.
- Identified recommendations for new policy adoption in Philadelphia.

Figure 1. Cycle of Addiction and Outcomes

Identified Patient Engagement Strategies:
- In Hospital Warm Hand Off- Engagement in hospital prior to discharge.
- Field Provider Facilitated- Delivered outside the hospital by emergency responders.
- Follow Up- Home visits and/or phone calls following discharge.

Intervention Strategies
- Using an overdose event as an identifier
- Take home naloxone kits
- Referral to Medication-Assisted Treatment (MAT)
- Recovery coaches and peer counselors

Philadelphia Area Programs
- None using the Warm Hand Off strategy identified.
- One program using the field providers identified.
- No follow up type programs identified.

Discussion

- 15 Programs sampled and assessed nationally.
- One post overdose event follow up program identified in Philadelphia (Field Provider Facilitated).
- Philadelphia could benefit from expansion of direct patient engagement programs.
- Most programs in Philadelphia provide tertiary prevention, not definitive for underlying addiction.

Conclusion

- Opioids are a significant cause of morbidity and mortality in the region and country.
- Philadelphia has one field provider program, but lacks warm hand off and follow up patient engagement strategies.
- Expansion of these secondary prevention strategies in Philadelphia may be useful in engaging a larger audience of high risk patients.