

Introduction:

- Hawai'i Health & Harm Reduction Center, 2018
 - Mission
 - Values
 - Services
 - Training Institute

Training Guide:

- Components of presentation
- Creating a guide
- Final product

AATOD State Membership:

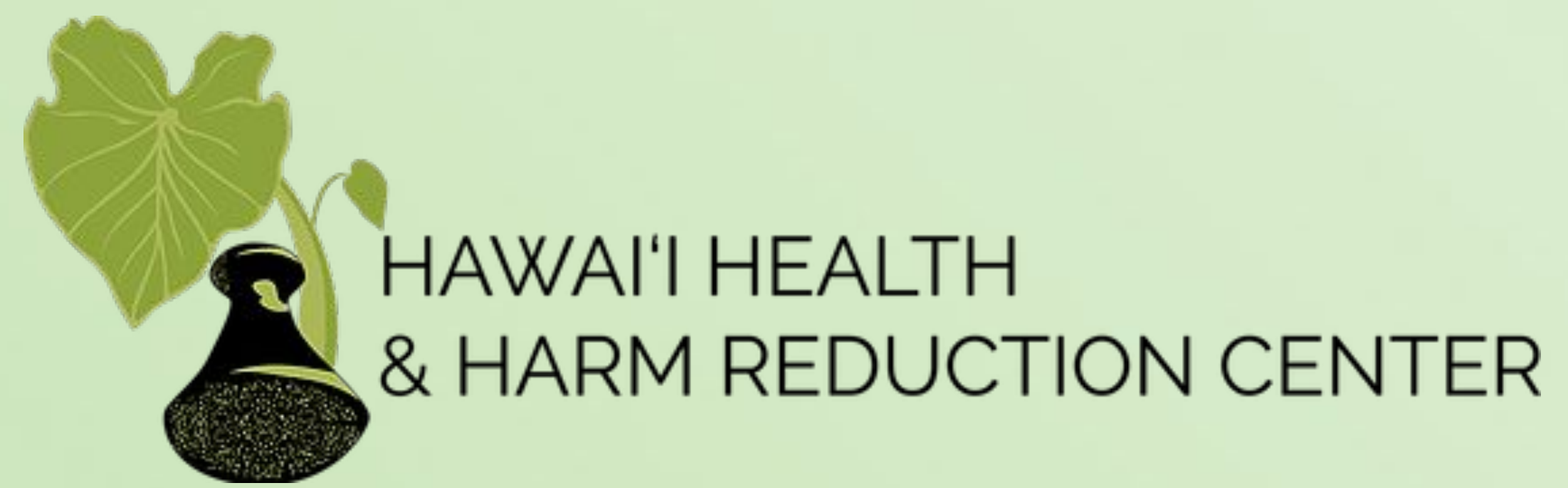
- Overview of AATOD
- Benefits of membership

MAT Fact Sheet:

- Contents of MAT Fact Sheet
 - Types of Medications
 - Did you know?
 - Health and Wellness
 - Resources

Title: C3-OD2A Workforce Development Education & Outreach Fellows
Author(s): The Fab Five Opioid Objectors: Kyra Jones, CJ Reinhofer, Kaitlyn Siegfried, Shaira Mae Padron & Alec Cornejo
Affiliations: Hawai'i Health & Harm Reduction Center

Introduction



“Reducing harm, promoting health, creating wellness, and fighting stigma in Hawai'i and the Pacific.”

Values

- Quality Care
- Compassion
- Integrity
- Advocacy
- Harm Reduction
- Respect

Services

- Syringe Exchange Program
- Overdose Prevention
- Buprenorphine
- HIV, HCV testing
- Training Institute
 - Opioids & Overdose: Prevention and Response
 - Motivational Interviewing
 - Mental Health First Aid



Additional Projects:

- Team collaboration
 - Senior resource(s)
 - Pain management resource(s)

Impact:

- State Level: AATOD Letter
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- Clients & Community: MAT Fact Sheet

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Training Guide

- H3RC's Opioid Overdose & Prevention Presentation
- Contents of the training guide
- Final product given to H3RC



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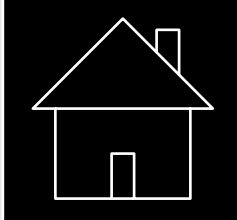
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AATOD State Membership



HAWAII HEALTH & HARM REDUCTION CENTER
The New Chapter for Life Foundation and The CHOW Project

August 18, 2020

Mark W. Parrino, M.P.A.
President
American Association for the Treatment of Opioid Dependence (AATOD)

Dear Mr. Parrino:

On behalf of the Hawai'i Health & Harm Reduction Center (HHHRC) and Ku Aloha Ola Mau (KAOM), we formally request your consideration in allowing us to join your association with the intent of forming an AATOD chapter in our state.

The Hawai'i Health & Harm Reduction Center's (www.hhhrc.org) mission is to serve Hawaii's communities by reducing harm and fighting the stigma of substance use, HIV, homelessness, substance use, mental illness, and poverty in our community. HHHRC fosters health, wellness, and systemic change in Hawai'i and the Pacific through care services, advocacy, training, prevention, education, and capacity building. HHHRC provides many services including: a 1 for 1 Syringe Exchange Program, outreach, medical case management, wound care in both our clinic and on the street. HHHRC has a robust buprenorphine program and naloxone distribution program which reached over 700 people in 2019. HHHRC's training institute provides trainings on Opioids and Overdose: Prevention and Response, Motivational Interviewing, and more. This year HHHRC has sponsored one DEA X Waiver course and will be coordinating the next one on September 16, 2020.

Ku Aloha Ola Mau (www.kualona.com) is Hawaii's oldest and largest Opioid Treatment Program with locations on both Oahu and Hawai'i Island. Serving more than 500 persons a year in their OTP, KAOM strives to offer culturally-based services that address the needs of the haumana, or students. KAOM is the only OTP on the island of Hawai'i and the Hui Ho'ola O Na Nahulu O Hawai'i program integrates Native Hawaiian healing and values into the evidence-based practices. KAOM provides services via telehealth and in-person and works closely with residential treatment centers to ensure those on MAT have the access to additional recovery services as needed.

677 Ala Moana Blvd. Suite 226 * Honolulu, Hawai'i 96813
www.hhhrc.org

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MEDICATED ASSISTED TREATMENT (MAT)

Medicated Assisted Treatment (MAT) is the use of medications (combined with counseling and behavioral therapies) as a treatment for substance use disorders such as **opioid use disorders (OUD)**¹.

Medications Used for MAT	Dosage (Forms of Medication) ²	Frequency of Dosage ²	Helps With ²
METHADONE	<ul style="list-style-type: none">• Oral Tablet• Oral Dispersible Tablet (wafer)• Oral Solution	<ul style="list-style-type: none">• Initial ~5mg - 10mg, (If experiencing withdrawal, increased dosage options available)	<ul style="list-style-type: none">• Prevents relapse to opioid misuse, following medically supervised withdrawal• Effectively reduces illicit opioid use, treats OUD, and retains patients in treatment better than placebos or no medication
BUPRENORPHINE	<ul style="list-style-type: none">• Sublingual tablets (under the tongue)• Buccal film/tablets (between gums and cheek)• Subdermal arm implant• Patch	<ul style="list-style-type: none">• Sublingual & Buccal film/tablets; once daily (frequency may vary)• Subdermal arm implant lasts for 6 months which can then be removed and a second set can be inserted.	<ul style="list-style-type: none">• Reduces opioid cravings and withdrawal• Lowers the potential for opioid misuse¹
NALTREXONE	<ul style="list-style-type: none">• Injectable• Oral Tablet	<ul style="list-style-type: none">• Inject 380mg intramuscularly once a month• 50mg oral tablet once a day	<ul style="list-style-type: none">• Blocks euphoric and sedative effects of an abused opioid (heroin, morphine, codeine)¹• Reduces return to illicit opioid use, increasing treatment retention, and reduces opioid cravings compared with placebo or no medications

BENEFITS OF MAT

Did you know?

- MAT can help patients reduce or stop opioid use and improve their health and functioning².
- Patients treated with medication were more likely to remain in therapy compared to patients receiving treatment that did not include medication^{4,5}.
- MAT medications do not substitute one addiction for another; the dosage of medication does not provide feelings of euphoria and helps reduce opioid cravings and withdrawal³.

Health and Wellness

- MAT decreases opioid use, opioid-related overdose deaths, criminal activity, and the transmission of infectious disease^{4,5,6}.
- MAT increases patients' ability to gain and maintain employment¹.
- MAT of opioid dependent pregnant women improves outcomes for their babies and reduces symptoms of neonatal abstinence syndrome (NAS)⁷.
 - Wrap-around services, including OUD counseling is strongly encouraged for all women with OUD because medication alone is not sufficient for optimal recovery or pregnancy and parenting outcomes⁸.

Resources

- (1) Substance Abuse and Mental Health Services Administration (2020). *Medication and counseling treatment*. Retrieved from <https://www.samhsa.gov/medication-assisted-treatment/treatment#medications-used-in-mat>
- (2) Substance Abuse and Mental Health Services Administration (2020). *TIP 63: Medications for opioid use disorder* [PDF file]. Retrieved from <https://store.samhsa.gov/product/TIP-63-Medications-for-Opioid-Use-Disorder-Full-Documents/PEP20-02-01-006>
- (3) National Institute on Drug Abuse (2020). *Effective treatments for opioid addiction*. Retrieved from <https://www.drugabuse.gov/publications/effective-treatments-opioid-addiction>
- (4) Mattick, R. P., Breen, C., Kimber, J., & Davoli, M. (2009). Methadone maintenance therapy versus no opioid replacement therapy for opioid dependence. *The Cochrane database of systematic reviews*, 2009(3), CD002209. <https://doi.org/10.1002/14651858.CD002209.pub2>
- (5) Mattick, R. P., Breen, C., Kimber, J., & Davoli, M. (2014). Buprenorphine maintenance versus placebo or methadone maintenance for opioid dependence. *The Cochrane database of systematic reviews*, (2), CD002207. <https://doi.org/10.1002/14651858.CD002207.pub4>
- (6) Schwartz, R. P., Gryczynski, J., O'Grady, K. E., Sharfstein, J. M., Warren, G., Olsen, Y., Mitchell, S. G., & Jaffe, J. H. (2013). Opioid agonist treatments and heroin overdose deaths in Baltimore, Maryland, 1995-2009. *American journal of public health*, 103(5), 917-922. <https://doi.org/10.2105/AJPH.2012.301049>
- (7) The American College of Obstetrics and Gynecologists (2017). *Opioid use and opioid use disorder in pregnancy*. Retrieved from <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2017/08/opioid-use-and-opioid-use-disorder-in-pregnancy>
- (8) World Health Organization. *Guidelines for the identification and management of substance use and substance use disorders in pregnancy*. WHO Press. 2014

Additional Projects:

- Team collaboration
 - Senior resource(s)
 - Pain management resource(s)

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Additional Projects

Senior Resources

Senior Resource Info Dump!

Source: <https://www.agingcare.com/articles/senior-drug-overdose-148701.htm>

- Median number of prescription medications in individuals 65+ is 4
 - 39% of this age group (15.1 million) take 5 prescription medications.
- **Emergency Room Visits**
 - ~44% of seniors who go the ER for adverse drug reactions (ADR) are admitted
 - Anti-coagulants (blood thinners), diabetes agents, opioid analgesics are responsible for 59.9% of drug-related hospitalizations in 65+ population
 - Fifteen most common drugs involved in ER visits
 - Anti-coagulants (example: warfarin, rivaroxaban, dabigatran, and enoxaparin)
 - Other 5
 - Diabetes agents (Example: insulin, metformin, glipizide, glyburide, and glimepiride)
 - Opioid analgesics
 - 4.6% of 65-79 year olds
 - 3.5% 80+
 - Older people might present nonspecific symptoms (fall, fatigue, constipation, cognitive decline), which makes identifying ADR's difficult
 - *How to Prevent Adverse Medication Events* infographic. Made for fun lol: <https://drive.google.com/file/d/1DUWGDkRk8gNl1mqI7Vop5eJG369wL2W-P/view>

- Statistics
- Special need for geriatric care
- Medication storage and use
 - Adverse side effects

Pain Management

Pain Management Info Dump

Source: <https://www.psychiatrytimes.com/view/opioid-use-elderly>

- Appropriate precautions to take before prescribing opioids to elderly for any type of pain management:
 - Screening for history of OUD, or other addictive disorders, for patient and family
 - Psychosocial history: stressors, history of childhood abuse or neglect, legal problems, and interpersonal relationship stressors will help to identify high-risk opioid misusers
 - Screen cognitive deficits and other psychiatric disorders

Source: <https://www.amcollege.edu/blog/benefits-of-lomilomi-massage>

- Lomilomi (Ho'olomilomi) utilizes medicinal plants, massage, breath exercises, and meditation.
 - Benefits
 - Improves circulation and immune response.
 - Increases range of motion and flexibility.
 - Lowers blood pressure and slows heart rate.
 - Improves posture and speeds healing.
 - Toxic cleansing
 - Techniques
 - Long fluid strokes of forearms and hands

- Statistics
- How to address chronic pain while also reducing the use of too many medications
 - Integrative medicine
 - Yoga, acupuncture, etc
 - Emphasis on Native Hawaiian traditional healing

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- Assisted H3RC on multiple levels
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