#### **VODP**

## Virtual Opioid Dependency Program

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**Fentanyl Crisis** 

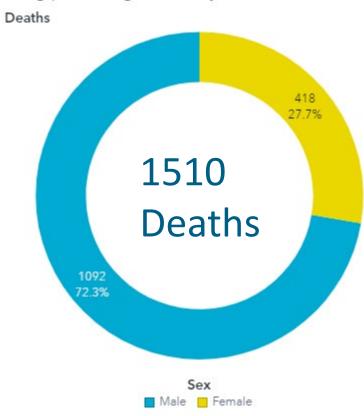
**Treatment** 

Access



### Last year in Alberta:

Drug poisoning deaths by sex



 Rates of apparent accidental opioid drug poisoning deaths per 100,000 were on average approximately seven times higher among First Nations people compared to Non-First Nations people from January 1, 2020 to June 30, 2020. **Fentanyl Crisis** Treatment **Access** 



Research

JAMA Psychiatry | Original Investigation

Association of Opioid Agonist Treatment With All-Cause Mortality and Specific Causes of Death Among People With Opioid Dependence A Systematic Review and Meta-analysis

Thomas Santo Jr, MPH; Brodie Clark, BPsych; Matt Hickman, PhD; Jason Grebely, PhD; Gabrielle Campbell, PhD; Luis Sordo, MD, PhD; Aileen Chen, BPsych; Lucy Thi Tran, BPsychSc; Chrianna Bharat, BSc; Prianka Padmanathan, MRCPsych; Grainne Cousins, PhD; Julie Dupouy, MD, PhD; Erin Kelty, PhD; Roberto Muga, MD, PhD; Bohdan Nosyk, PhD; Jeong Min, MSc; Raimondo Pavarin, MPH; Michael Farrell, MD; Louisa Degenhardt, PhD

- Systematic review with 750,000 patients
- All cause mortality reduced by more than 50%

# **Opioid Agonist Therapy**

Sublocade (Buprenorphine)

Suboxone (Buprenorphine)

Methadone

Kadian

# Sublocade

- Buprenorphine Extended Release
- Lasts for months
- Treats withdrawal, treats cravings
- Protects against overdose
- No need for daily dosing / testing
- No complicated suboxone restarts

## Aren't we substituting one addiction for another?

#### Fentanyl

- Causes euphoria
- Become severely sick if you stop even for a few hours
- Crave fentanyl
- Loss of Control
- Use despite consequences
- Overdose and death
- Negatively affects life
- Compulsion

#### Sublocade

- No euphoria
- Lasts for months
- No craving
- Keeps you feeling normal day to day
- Protects against overdoses
- Many get their life back
- Like any other medication

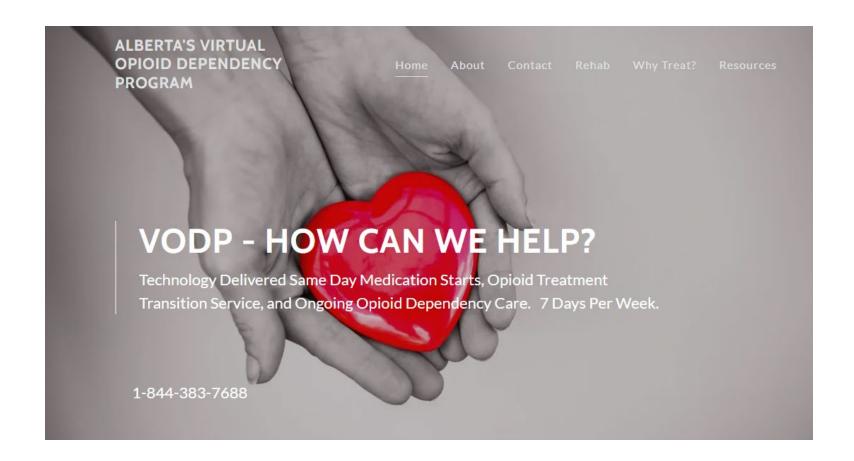
**CONCLUSIONS AND RELEVANCE** This systematic review and meta-analysis found that OAT was associated with lower rates of mortality. However, access to OAT remains limited, and coverage of OAT remains low. Work to improve access globally may have important population-level benefits.

*JAMA Psychiatry.* 2021;78(9):979-993. doi:10.1001/jamapsychiatry.2021.0976 Published online June 2, 2021. Last corrected on March 16, 2022.

- Access limited
- Coverage low

**Fentanyl Crisis** Treatment Access -





#### Anyone in Alberta calls 1 844 383 7688

Same day start

- Immediate assessment by professional staff
- Physician reviews collateral, provincial EMR, and connects with patient (phone call for Buprenorphine, Zoom for other OAT)
- Treatment plan made, Prescription sent to nearest pharmacy
- Staff follow up next day

Ongoing care or transition to patient's preferred provider

## Stoney Partnership

- Remote physician consultant, + local team.
- On demand medication starts
- Utilize Sublocade and Suboxone (no need for daily dosing, urine testing, labs)
- Novel use of Sublocade
- Meet regularly to review patients

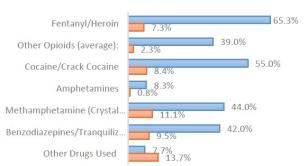
#### Is it working?

#### Social Functioning (Mean BTOM SFS)

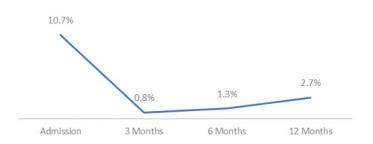


(Brief Treatment Outcome Measure - Condensed Version (BTOM-C v1.0) Social Functioning Scale (SFS) - Lower scores reflect improved social functioning)

#### Drug Use Admission vs 3 Months



#### Accidental Overdose by Assessment Time



Employment: 56% of clients who reported a change in job status described new income related to employment on reassessments.

# Thank you! Contact: Grady Gibson grady.gibson@ahs.ca 4037831720

