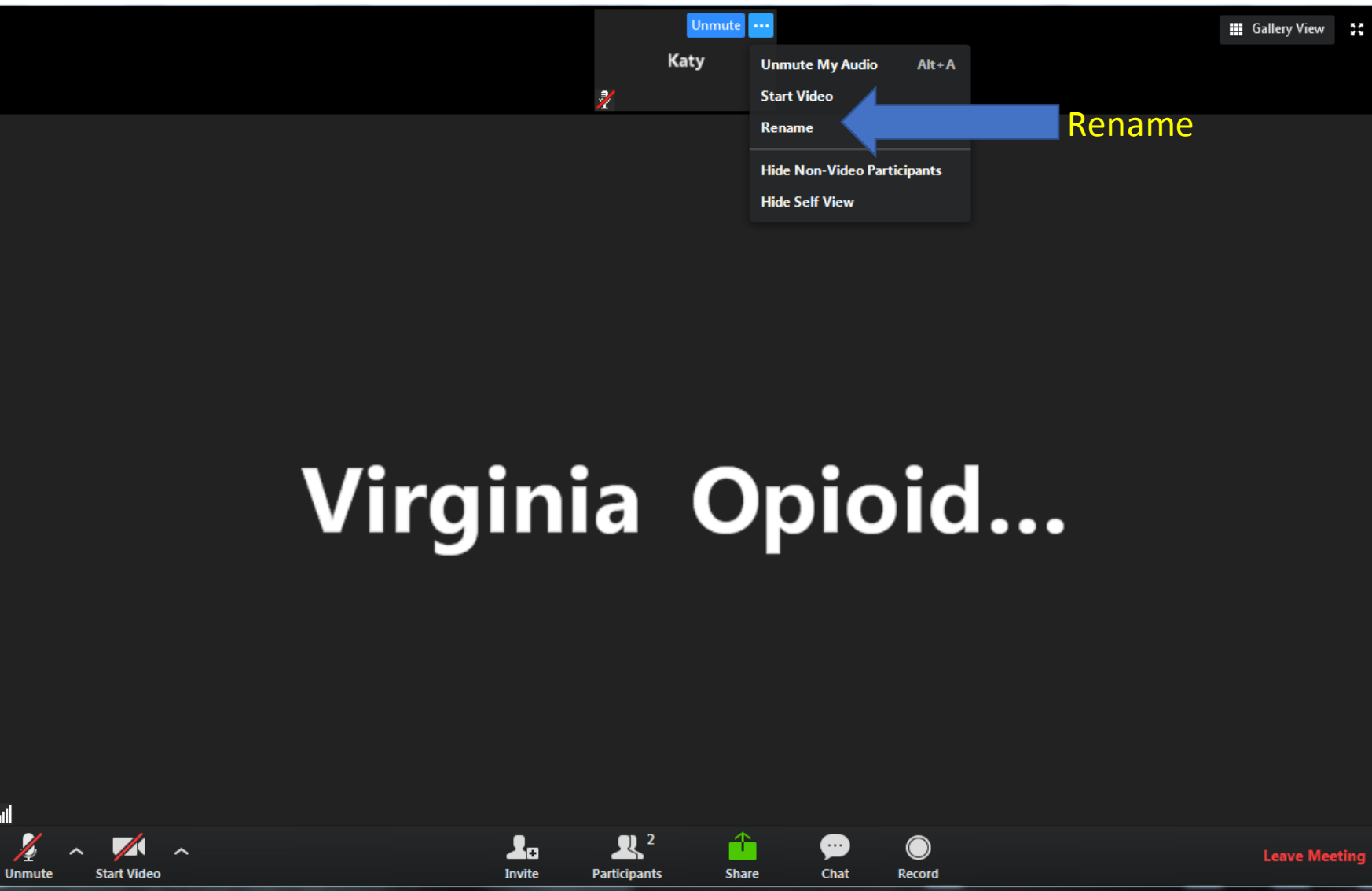


Virginia Opioid Addiction ECHO* Clinic

February 18, 2022

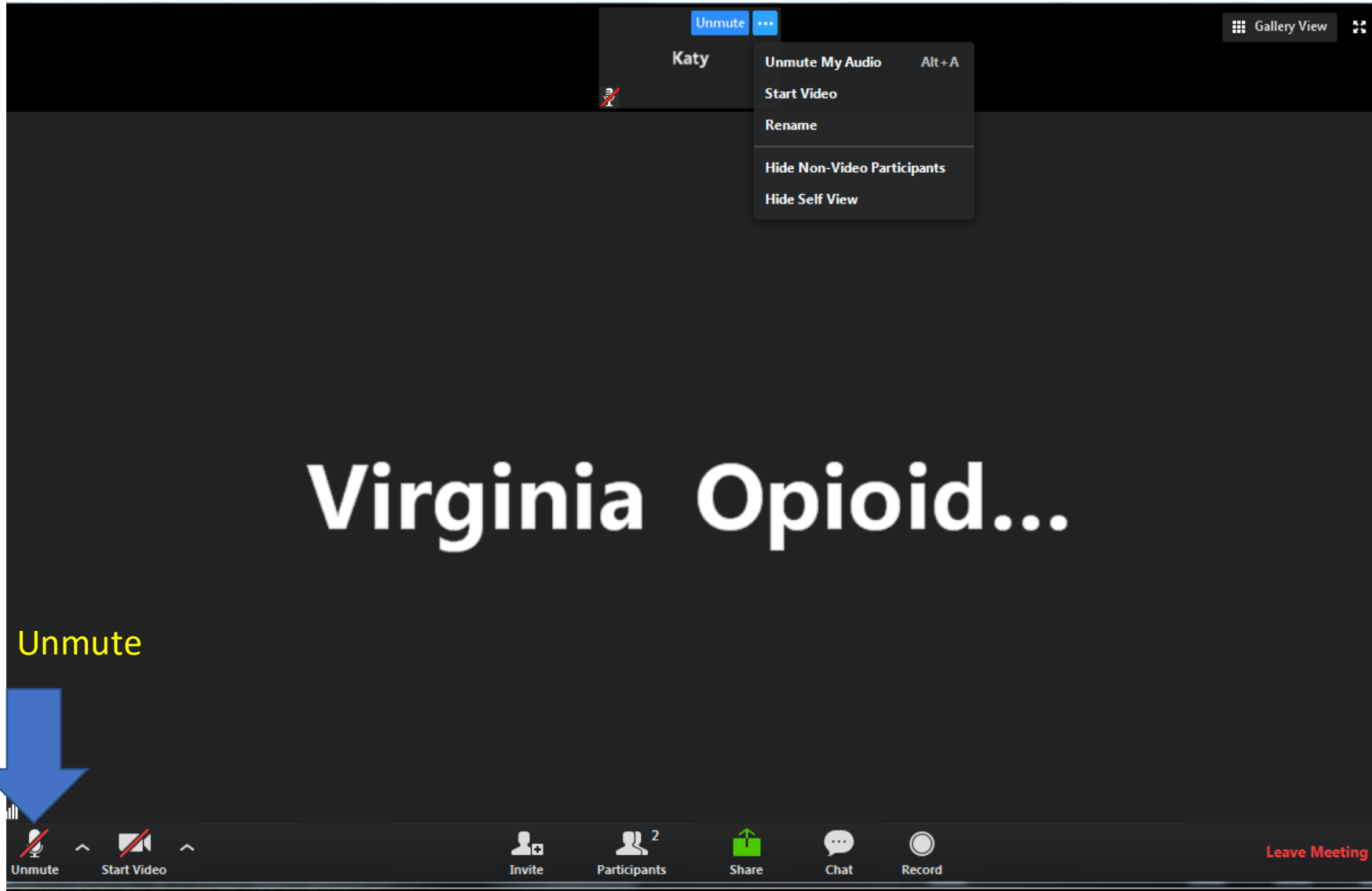
*ECHO: Extension of Community Healthcare Outcomes

Helpful Reminders



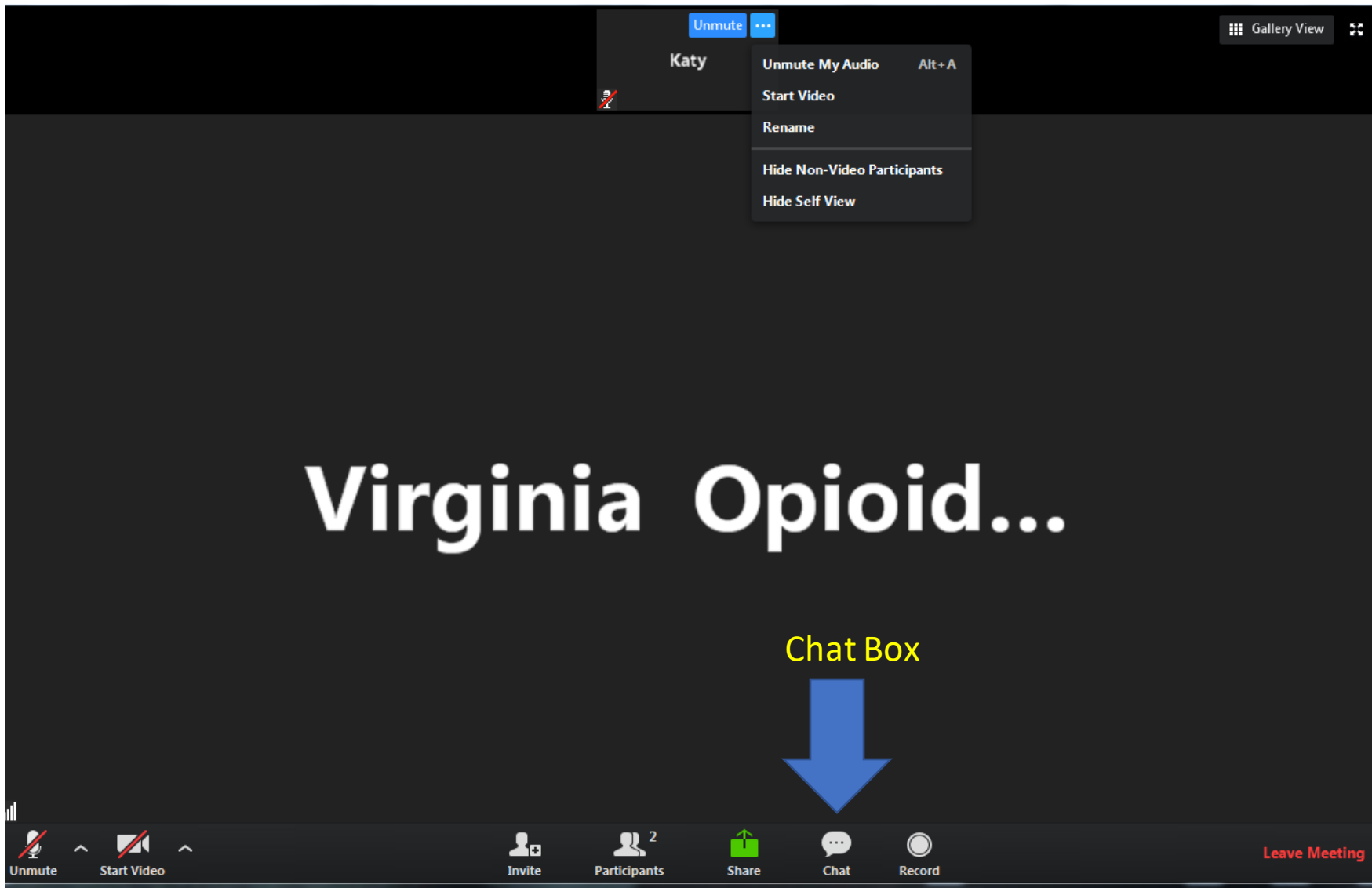
- Rename your Zoom screen, with your name and organization

Helpful Reminders



- You are all on **mute** please **unmute** to talk
- If joining by telephone audio only, ***6** to mute and unmute

Helpful Reminders



- Please type your full name and organization into the chat box
- Use the chat function to speak with IT or ask questions

VCU Opioid Addiction ECHO Clinics



- Bi-Weekly 1 hour tele-ECHO Clinics
- Every tele-ECHO clinic includes a 30 minute didactic presentation followed by case discussions
- Didactic presentations are developed and delivered by inter-professional experts
- Website Link: www.vcuhealth.org/echo

Hub and Participant Introductions



VCU Team	
Clinical Director	Gerard Moeller, MD
Administrative Medical Director ECHO Hub	Vimal Mishra, MD, MMCI
Clinical Experts	Lori Keyser-Marcus, PhD Courtney Holmes, PhD Albert Arias, MD Salim Zulfiqar, MD Megan Lemay, MD Katie Adams, PharmD
Didactic Presentation	Olivia Norman, JD
Program Manager	Bhakti Dave, MPH
Acute Telehealth Manager	Tamera Barnes, MD
IT Support	Vladimir Lavrentyev, MBA

- Name
- Organization

Reminder: **Mute** and **Unmute** screen to talk

*6 for phone audio

Use **chat** function for Introduction

What to Expect

- I. Didactic Presentation
 - I. **Olivia Norman, JD**
- II. Case presentations
 - I. Case 1
 - I. Case summary
 - II. Clarifying questions
 - III. Recommendations
- III. Closing and questions



Lets get started!

Didactic Presentation



Latest Trends in Illegal Substances

Olivia Norman Emerson

Assistant United States Attorney

Biggest Threats

- Counterfeit pharmaceuticals
- Counterfeit Illicit Drugs
- Mass produced Illicit Fentanyl and Methamphetamine from Mexico
- Dark Web purchases of illegal substances from China

Counterfeit Pharmaceuticals





Illicit Fentanyl
Found in
Counterfeit
Oxycodone



Pure
Methamphetamine
Found in Counterfeit
Adderall



Clonazepam found in
counterfeit Xanax



Counterfeit Illicit Drugs





Fentanyl being
sold as Heroin

MDMA/Ecstasy actually
pure Methamphetamine



Meth 2.0

- For years Meth was made with ephedrine
- Crack down on ephedrine sales in the US drove the producers to Mexico
- Recent crack down on ephedrine in Mexico caused the cartels to change methods of creating meth
- Meth is now created using readily available industrial chemicals
- New method has resulted in drastically higher production and reduced cost (80%)

Effects of the new Meth

- Serious paranoia
- Rapid onset cerebral decomposition that lasts long after cessation of use
- rapid onset of schizophrenia, rapid onset of hallucinations
- All anecdotal; no research to confirm
- Suspected to be the core of the homeless/tent camp problem throughout the country

Overdoses in Virginia




Benzodiazepines

- Rate of overdose death has slowly decreased since 2007
- Most overdoses also involve other substances
- In 2020, over 65 percent of overdoses involved fentanyl
- Counterfeit benzodiazepines from China and the Dark Web have been found to contain Flualprazolam, Clonazolam, and/or fentanyl






Cocaine

- Rate of overdose death has been slowly increasing since 2013
 - In 2020, nearly 82 percent of cocaine deaths also included fentanyl
 - Fatal cocaine overdoses increased by 33.2 percent from 2019 to 2020
 - 2021 rate will likely be at least a 23 percent increase over 2020.
- 




Fentanyl

- Rate of overdose death has sharply increased since 2012
 - Since 2016, the majority of fentanyl deaths were due to illicitly produced fentanyl and fentanyl analogues
 - In 2020, there were 1,659 fentanyl overdose deaths in Virginia, which was a 72.1 percent increase in overdose deaths compared to 2019.
 - The predicted number of fentanyl overdose deaths in Virginia for 2021 is 2,042.
- 



Methamphetamine

- From 2007 to 2014, overdoses were fairly uncommon
 - The number of overdoses began to increase in 2014
 - There was a 96 percent increase in meth overdose deaths in 2020 compared to 2019
 - The rate of overdose death in 2021 is predicted to be 71 percent higher than in 2020.
- 

Resources

- Virginia Department of Health, Office of the Chief Medical Examiner, Fatal Drug Overdose Quarterly Report, 3rd Quarter 2021, January 2022
- Sam Quinones on Meth, Fentanyl, and the Least of Us, EconTalk

Disclosures

Olivia Norman, JD has no financial conflicts of interest to disclose.

There is no commercial or in-kind support for this activity.

Questions?

Case Presentation #1

Dusty Behner, NP

- 12:35-12:55 [20 min]
 - 5 min: Presentation
 - 2 min: Clarifying questions- Spokes
 - 2 min: Clarifying questions – Hub
 - 2 min: Recommendations – Spokes
 - 2 min: Recommendations – Hub
 - 5 min: Summary - Hub



Reminder: **Mute** and **Unmute** to talk

***6** for phone audio

Use **chat** function for questions

Main Question

Did I do the right thing? I bent my own rules for the safety of the staff, milieu, and hopefully the patient, but was it the right thing to do?

Demographic Information

Patient Joe Doe was a 50 yo homeless AA male with chronic pain, painful edema to his feet, DM II, COVID+, and Opiate Use disorder.

Background Information

Discharge Diagnosis:

Adjustment disorder with depressed mood

Cocaine use disorder severe with cocaine induced psychosis with hallucinations with onset during intoxication

Opioid use disorder with withdrawal severe managed with Methadone

Personality disorder unspecified with cluster B personality traits

Neurocognitive disorder unspecified

Tobacco use disorder severe

History of alcohol and cannabis use disorders mild in reported sustained remission.

Essential HTN, COPD, Hypothyroidism with Graves Disease and Hx of Thyroid surgery, Osteoarthritis, Chronic pain, surgical intervention for psychiatric medication side effect, Vitamin D deficiency

Previous Interventions

He was given a dose of Methadone 70mg in the ED prior to arrival to the unit. It was recorded that the Methadone clinic was contacted, his dose verified, and thus he received this dose in the ED.

The medication was not restarted when he was admitted. I was taught that if I am going to order medications for opiate use disorders to always call and verify the dose, but the clinic did not answer, the patient was escalating, and began threatening to harm other patients and the staff. He received Haldol, Benadryl, and Ativan and continued to escalate, yelling at people with his mask off and getting in people's face. I gave him the medication. I tried for 3 days to contact the clinic and couldn't get through to verify the dose.

The team restarted his home Gabapentin and the patient was significantly drowsy, falling asleep during assessments, and had AMS. I tried again to call them to discuss decreasing the methadone since we tried adjusting the Gabapentin doses, frequency, and schedule several times. No response.

Other Relevant Information

The patient was eventually stabilized, was calm and cooperative, A&O x4, and discharged one day while I was out of town. He was instructed to follow up with the clinic to continue getting his Methadone doses.

After his discharge, the clinic called back and talked to the Resident who discharged him and I don't know what was discussed.

I came on to my shift and immediately began getting pages that patient was agitated, yelling, escalating, and goal directed on having Methadone restarted.

Reminder: Main Question

Did I do the right thing? I bent my own rules for the safety of the staff, milieu, and hopefully the patient, but was it the right thing to do?

Case Studies

- Case studies
 - Submit: www.vcuhealth.org/echo
 - Receive feedback from participants and content experts
 - Earn **\$100** for presenting



The success of our telehealth program depends on our participants and those who submit case studies to be discussed during clinics. We recognize the following providers for their contributions:

- **Ademola Adetunji, NP** from Fairfax County CSB
- **Tara Belfast-Hurd, MBA-PA** from Department of Behavioral Health and Developmental Services
- **Michael Bohan, MD** from Meridian Psychotherapy
- **Ramona Boyd, NP** from Health Wagon
- **Diane Boyer, DNP** from Region Ten CSB
- **Melissa Bradner, MD** from VCU Health
- **Kayla Brandt, B.S.** from Crossroads Community Service Board
- **Candace Fletcher, PharmD Candidate** from Hopkins Medical Association
- **Susan Cecere, LPN** from Hampton Newport News
- **Kimberly Dexter, DNP** from Hampton Newport News CSB
- **Shokoufeh Dianat, DO, MAS** from Virginia League from Planned Parenthood
- **Candace Fletcher, PharmD** from Hopkins Medical Association
- **Michael Fox, DO** from VCU Health
- **Shannon Garrett, FNP** from West Grace Health Center
- **LaShawna Giles, MSW** from Hampton Newport News CSB
- **Sharon Hardy, BSW, CSAC** from Hampton-Newport News CSB
- **Kara Howard, NP** from Southwest Montana Community Health Center
- **Sunny Kim, NP** from VCU Health
- **Heidi Kulberg, MD** from Meridian Health
- **Thokozeni Lipato, MD** from VCU Health
- **Caitlin Martin, MD** from VCU Health
- **Jennifer Melilo, FNP** from Chesapeake Integrated Behavioral Health
- **Dawn Merritt, QMHP** from Eastern Shore CSB
- **Maureen Murphy-Ryan, MD** from AppleGate Recovery
- **Faisal Mohsin, MD** from Hampton-Newport News CSB
- **Jeromy Mullins, PharmD Candidate** from Hopkins Medical Association
- **Stephanie Osler, LCSW** from Children's Hospital of the King's Daughters
- **Davina Pavie, QMHP** from Hanover County CSB
- **Winona Pearson, LMSW** from Middle Peninsula Northern Neck CSB
- **Jennifer Phelps, BS, LPN** from Horizons Behavioral Health
- **Crystal Phillips, PharmD** from Appalachian College of Pharmacy
- **Jashanda Poe, MA** from Rappahannock Area CSB
- **Tierra Ruffin, LPC** from Hampton-Newport News CSB
- **Manhal Saleeby, MD** from VCU Health Community Memorial Hospital
- **Jenny Sear-Cockram, NP** from Chesterfield County Mental Health Support Services
- **Elizabeth Signorelli-Moore, LPC** from Region 1 CSB
- **Amber Sission, QMHP** from Eastern Shore CSB
- **Daniel Spencer, MD** from Children's Hospital of the King's Daughters
- **Linda Southall, QMHP** from Alleghany Highlands CSB
- **Heather Stone, PhD, LCSW** from Central Virginia Health Services of Petersburg
- **Cynthia Straub, FNP-C, ACHPN** from Memorial Regional Medical Center
- **Saba Suhail, MD** from Ballad Health
- **Michelle Tanner, LPC** from Hanover County CSB
- **Barbara Trandel, MD** from Colonial Behavioral Health
- **Bill Trost, MD** from Danville-Pittsylvania Community Service
- **Art Van Zee, MD** from Stone Mountain Health Services
- **Ashley Wilson, MD** from VCU Health
- **Sarah Woodhouse, MD** from Chesterfield Mental Health
- **Susan Mayorga, BA, CBIS** from Community Health Center of the New River Valley
- **Jordan Siebert, Peer Recovery Specialist** from Daily Planet Health Services

Claim Your CME and Provide Feedback



- www.vcuhealth.org/echo
- To claim CME credit for today's session
- Feedback
 - Overall feedback related to session content and flow?
 - Ideas for guest speakers?

Access Your Evaluation and Claim Your CME






Browser address bar: <https://www.vcuhealth.org/for-providers/education/virginia-opioid-addiction-echo/va-opioid-addiction-echo>

Navigation bar: Explore VCU Health, Search, CAREERS at VCU Health, SUPPORT VCU Health, MY VCU HEALTH Patient Portal, CONTACT VCU Health


VCUHealth logo and menu: Our Providers, Our Services, Locations, Patients & Visitors, For Your Health, Our Story

Breadcrumbs: Home > For Providers > Education > Virginia Opioid Addiction ECHO > Home

 **Virginia Opioid Addiction ECHO**

Welcome to the Virginia Opioid Addiction Extension for Community Health Outcomes or ECHO, a virtual network of health care experts and providers tackling the opioid crisis across Virginia. [Register now for a TeleECHO Clinic!](#)



- ### Network, Participate and Present
- Engage in a collaborative community with your peers.
 - Listen, learn, and discuss didactic and case presentations in real-time.
 - Take the opportunity to [submit your de-identified study](#) for feedback from a team of addiction specialists. We appreciate [those who have already provided case studies](#) for our clinics.
 - Provide **valuable feedback & claim CME credit** if you participate in live clinic sessions.

- ### Benefits
- Improved patient outcomes.
 - **Continuing Medical Education Credits:** This activity has been approved for **AMA PRA Category 1 Credit™**.

Telehealth

- About Telehealth at VCU Health ▾
- For Patients ▾
- For Providers ▴**
- Virginia Opioid Addiction ECHO ▴**
- Register Now!
- Submit Your Case Study
- Continuing Medical Education (CME)
- Curriculum & Calendar
- Previous Clinics (2018)
- Previous Clinics (2019)
- Resources
- Our Team

Access Your Evaluation and Claim Your CME



https://redcap.vcu.edu/surveys/?s=KNLEBPX4LP

Project ECHO Survey

ECHO
Virginia Commonwealth University

Please help us serve you better and learn more about your needs and the value of the Virginia Opioid Addiction ECHO (Extension of Community Healthcare Outcomes).

First Name
* must provide value

Last Name
* must provide value

Email Address
* must provide value

I attest that I have successfully attended the ECHO Opioid Addiction Clinic.
* must provide value

Yes

No

reset

_____, learn more about Project ECHO

Watch video

How likely are you to recommend the Virginia Opioid Addiction ECHO by VCU to colleagues?

Very Likely

Likely

Neutral

Unlikely

Very Unlikely

reset

What opioid-related topics would you like addressed in the future?

What non-opioid related topics would you be interested in?

Access Your Evaluation and Claim Your CME



- www.vcuhealth.org/echo
- To view previously recorded clinics and claim credit

Access Your Evaluation and Claim Your CME



Education

Contact Us

Diabetes and Hypertension Project ECHO

+

Nursing Home ECHO

+

Palliative Care ECHO

+

Virginia Opioid Addiction ECHO

-

Contact Us

Curriculum Calendar and Registration

Our Team

Previous Clinics - 2021

Resources

Thank You

Virginia Opioid Addiction ECHO Continuing Medical Education

Virginia Opioid Addiction ECHO Evaluation

Virginia Sickle Cell Disease ECHO

+

Child Abuse Project ECHO

+

Early Intervention Project ECHO

+

Previous Clinics - 2021

Review topics we covered in previous Virginia Opioid Addiction ECHO clinics.

January 15, Buprenorphine Taper

Presented by Masaru Nishiaoki, MD

- [View Presentation](#)
- [View Video](#)

January 29, Panel Discussion: COVID and Chronic Conditions

Panelists: Albert Arias, MD, Alex Krist, MD and Katherine Rose, MD

- [View Presentation](#)
- [View Video](#)

February 12, Grief Impacting Recovery

Presented by Courtney Holmes, PhD

- [View Presentation](#)
- [Video Video](#)

February 26, Virginia Drug Court System

Presented by Melanie Meadows

- [View Presentation](#)
- [View Video](#)

March 12, COVID and Recovery: Panel Discussion

Presented by Tom Bannard, MBA Omri Morris, CPRS Raymond Barnes, CPRS Erin Trinh, CPRS

- [View Presentation](#)
- [View Video](#)

March 26, Effects of Pharmacology on Cognitive Function

Presented by Gerry Moeller, MD

- [View Presentation](#)
- [View Video](#)
- [View Resource](#)

April 9, PropER Clinic and SUD Virtual Bridge Clinic: Linking Patients from ED to PCP and SUD Care

Presented by Taruna Aurora, MD and Brandon Wills, MD

- [View Presentation](#)
- [View Video](#)



VCU Virginia Opioid Addiction TeleECHO Clinics

Bi-Weekly Fridays - 12-1:30 pm

Mark Your Calendar --- Upcoming Sessions

March 4: Cannabis Induced Psychosis

Dr. Arthur Calloway, MD

March 18: Behavioral Health Therapies for SUD
Cohen, PhD

Dr. Sarah Meshberg-

April 1: Buprenorphine Macro dosing

Dr. Brandon Wills, MD

Please refer and register at vcuhealth.org/echo



THANK YOU!

Reminder: **Mute** and **Unmute** to talk
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Use **chat** function for questions