

Abstract of Study Supported by a 2015 Resident Research Grant Recipient

Naloxone dispensing to Avert Opiate Overdose Among Primary Care clinic Patients in Suburban Maryland and the District of Columbia. (G1505RRG)

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Abstract

Opioid overdose is a major problem in the Washington, DC metropolitan region and nationwide. Although this issue traditionally has primarily affected people who inject drugs (PWID), a growing number of overdoses are occurring amongst people who are prescribed opioid analgesics for pain conditions. This issue has distinct ramifications in the Washington, DC with over 60 individuals dying annually from unintentional opioid overdose annually from 2009 to 2011 (i).

Naloxone is a low-cost, well studied, highly effective method for preventing opioid overdose. Administration of naloxone can be done by non-medical personnel. To this end, programs throughout the US have trained individuals to provide naloxone to at-risk individuals for over a decade. However, only one small program exists within the Washington, DC region, and none in suburban Maryland.

This project aims to expand the distribution of naloxone to at-risk individuals prescribed opioids in a community medical clinic in suburban Maryland. At-risk individuals will be screened from clinic records and medical provider interviews. Selected individuals will participate in either small group education sessions or one-on-one brief interventions with a medical provider. Overdose reversal kits and opiate risk education materials will be distributed. Individuals will undergo pre- and post-intervention knowledge and risk assessment questionnaires. Longitudinal follow-up will assess patterns of both opiate and naloxone use.