# Preventing **Opioid Abuse** in the **Clinical Setting:**

Innovative e-Tools for CME delivery to physicians, nurses, and other health care providers

Robert Carroll, PhD(c), MN, RN, ACRN Project Director, IQ Solutions

Jane Lowers, BSJ Senior Scientific Director, Medscape Education

11300 Rockville Pike, Suite 901, Rockville, Maryland 20852 301.984.1471 www.igsolutions.com







### The Prescription Opioid Abuse Epidemic

- Accidental deaths involving opioid pain relievers increased 4X from 1999 through 2008.
- Opioid overdose-related deaths now outnumber all other drug-relate deaths, across all age ranges.
- 18% of opioid abusers in the past year received them directly from 1 doctor.
- Over the past 20 years, opioid Rx's have increased 4X.
- > 100 million chronic pain patients in US, with estimates of abuse ranging from 3%–26%.

## **Project Overview**

- In 2009, NIDA unveiled its outreach initiative, NIDAMED, specifically to help physicians, medical interns and residents, and other clinicians understand and address the complex and growing problem of prescription drug abuse.
- NIDAMED makes materials from NIDA Centers of Excellence (CoE) for Physician Information available online.
- The overarching goal of this project is to develop continuing medical education resources on the topic of prescription drug abuse that build on the current NIDA materials and familiarize clinicians with available resources.

### **Project Design**

### Task 1: CME Module Development

- Design, develop, and launch two 1.25-1.75 credit, CME/ CE certified, self-paced learning modules, hosted on the Medscape Education Web site and accessible via the NIDAMED web site.
- Employ the Medscape "Test and Teach" approach to content and experience design, which combines casebased learning, didactic instruction, and communication video modeling.

### **CME Module Objectives**

- Module #1: Safe Prescribing for Pain
- Communicate effectively and nonjudgmentally with patients regarding opioid use and abuse.
- Rx drugs.
- Evaluate patient risk for opioid pain medication abuse.
- Module #2: Managing Pain Patients Who Abuse Prescription Drugs
- Assess and monitor patients taking opioids, for abuse.
- Propose nonjudgmental communication strategies to engage patients in dialog.
- Formulate treatment management and possible referral plans to prevent and address opioid addiction.

• In 2010, 1.2 million ER visits for prescription drug abuse (of 2.3 million total drug-related visits).

Screen for drug abuse, including nonmedical use of

## **Project Design**

### Task 2: Recruitment and Distribution

Draft and implement a comprehensive marketing and dissemination plan to promote the e-learning modules, CME components, and mobile application. Specific objectives for this task are to:

- Create and implement a recruitment and distribution plan.
- Recruit at least 5,000 practicing physicians to complete the CME activities.
- Partner with at least two medical schools to include the e-learning module in their coursework, reaching a minimum of 200 students.

### **Dissemination Task**



### EVALUATION

# **Recruitment and Distribution Materials**



### **NMASSIST Tool:** Mobile Applications



## **Project Design**

### Task 3: Evaluation

Develop and execute an effective evaluation strategy to obtain metrics on the use and functionality of the NIDA e-learning modules.

The evaluation focused on three components:

- Utilization of the CME modules.
- Participant satisfaction with the CME modules.
- Assessment of the knowledge transfer through the CME modules.

## **Evaluation Plan Structure**



## Key Performance Indicators (KPI)

- KPI 1: Min. 5,000 physicians completing the 1.25 and 1.75-credit CME activities.
- KPI 2: At least 200 medical students completing the two non-accredited modules as part of their medical school curriculum.
- KPI 3: Achieve a total of 1.7 million touch-points over the 2nd contract year.
- **KPI 4:** Increase traffic to the NIDAMED site from a baseline of 2,600 to a target of 5,000 visits per month.

## **Results: Key Performance Indicators**

Key Performance Indicators (KPI)			
METRIC:	GOAL:	COMPLETED TO DATE:	PROGRESS GRAPH
Accredited CME Modules	5,000	43,957	43,957
Unaccredited Modules	n/a	192	192
Touchpoints	1,700,000	2,081,478	2,081,478

### **Implications for Research and Practice**

- health care providers.

- resources, and CME modules.

### Recommendations



### Screen Captures from Select "Test and Teach" CME Videos





• Prevention and identification of opioid abuse while ensuring adequate pain management is a major challenge for

• NIDA is able to provide a wide range of tools and resources to meet this challenge.

• The innovative on-line and handheld device-based CME programs described here provide user-friendly and effective tools in educating health care providers on the prevention of opioid abuse.

• When disseminated in a strategic manner, including via medical school curricula, they can also serve as gateways to other assessment and treatment resources.

• Partnering with governmental, civic, and private entities provides an effective means to distribute these tools,

• Further programs developed for both CME and health sciences curricula should be evaluated for self-reported behavior change, or intention to change.

• Future iterations should focus on working with more complex clients, such as the dually diagnosed, or pain management of the concomitant illicit substance abuser.

• Integration into future health sciences curricula could include opportunities for utilizing simulated patient models.



- **A.** Assessing for adequate pain control and screening for potential abuse risk.
- B. Assessing opioid effectiveness and implementing a pain control treatment agreement.
- . Assessing the chronic pain patient for opioid abuse potential.

### Support

This project is part of th portfolio of medical education resources for substance use disorders, and is supported by the White House **Office of National Drug Control Policy**