

Opioids During the Coronavirus Pandemic:

Synergy Health Consulting recommendations for managing patients receiving Long-term Opioid Therapy, Medication Assisted Treatment, and/or experiencing Chronic Pain during the Covid-19 Outbreak

Recommendations:

1. Advice for treating patients receiving buprenorphine:

- a. In clinical decision making, opt for what is safest for the community, rather than for the individual patient; the safety of the community takes precedence.
- b. Conduct nearly all visits remotely, attempt to have nearly all staff work from home.
- c. Do NOT let HIPAA concerns stop you from offering remote care as OCR has waived most HIPAA requirements during the pandemic ([link](#)).
- d. Increase to monthly or less frequent take-homes for most patients. This can include patients at higher risk of relapse or overdose. Increase remote support to patients to mitigate this risk.
- e. Conduct weekly or more frequent check-ins remotely via telephone, email, videoconferencing, and any other type of virtual visit you have available. This is an opportunity to mitigate the overdose risks incurred above.
- f. If video is available, use it to support: therapy, behavioral health coaching, pill counts, and monitoring saliva-based drug screens. The intent of video-based monitoring in all cases is to increase patient safety, not punishment.
- g. Anticipate the increased risk of relapse resulting from social isolation. Create plans for both patients and providers to help mitigate this reality.

2. Advice for treating patients receiving long term opioid therapy:

- a. In clinical decision making, opt for what is safest for the community, rather than for the individual patient; the safety of the community takes precedence.
- b. Conduct most visits remotely.
- c. Attempt to have most staff work from home.
- d. Do NOT let HIPAA concerns stop you from offering remote care as OCR has waived most HIPAA requirements during the pandemic ([link](#)).
- e. Increase to monthly or less frequent prescription fills.
- f. Discuss with the patient and plan for increased risks of dose-escalation, pain flare-ups, diversion, and risk of abuse due to disruption and social isolation. Make sure both patient and providers have a plan to deal with those contingencies.
- g. Tapers should be paused in general. Consider proceeding with tapers when both patient and provider are confident it is safe to proceed without patient destabilization.
- h. Dose escalation:
 - i. Anticipate that your patients will ask for escalation of controlled substance dosages. **Escalation is not recommended in the vast majority of situations.**

- ii. Continue to use your support team and seek out non-medication therapy to support the patient with increases in pain and withdrawal symptoms.
See below for resources available during isolation.
- iii. Use the same risk/benefit calculation you would in normal times. The benefits as well as the risks are likely to be increased under social isolation and stress.
- iv. Any dose increase should be clearly justified in the chart and prescription, so the care team is aware of the plan, and that it is temporary.
If you do increase the dose, limit to no more than 5-10% increase (akin to the CDC guidance for tapering but in reverse).
- i. Continue to recommend naloxone to patients on long-term opioid therapy, especially those on high doses or with more than a 30-day supply.
Naloxone is unlikely to be useful to patients in isolation without anyone else home.

3. Advice for treating patients with Chronic Pain:

- a. When in conflict, the risks to the community take precedence over risks to the patient.
- b. Conduct most visits remotely, attempt to have most staff work from home
- c. Do NOT let HIPAA concerns stop you from offering remote care, OCR has waived most HIPAA requirements during the pandemic ([link](#))
- d. Increase telephone and virtual visit check-ins and group visits
Consider creating private social media groups for existing pain groups (e.g. private Facebook groups).
- e. Discuss with the patient and plan for increased risks of pain flare-ups due to disruption and social isolation. Make sure both patient and providers have a plan to address those expected flare-ups
- f. Discuss approaches to receiving support while socially isolating. Consider patient-specific strategies to improve social integration despite physical distance.
- g. See Resources section for non-Medication treatments for pain at home

Services Synergy can offer to support you in this moment of crisis:

- Advice and perspective from experts in the field
- Assistance drafting policies or adapting for the care of patients in the populations
- Technical support and troubleshooting to accomplish any of the recommendations
- List of current resources for to patients and practitioners, (see below)
- Visit us at: <https://www.synergyhealthconsulting.com/>

Resources

- **Oregon Pain Guidance Covid-19 Resources:**
<https://www.oregonpainguidance.org/resources/covid19-opioid-care-resources/>
- **Oregon Pain Guidance Pain Education Videos:**
<https://www.oregonpainguidance.org/resources/patient-education-videos/>
- **Non-medication treatments for pain when at home**
 - Natalie Stawsky Yoga and mindfulness YouTube channel:
<https://www.youtube.com/channel/UCFF6lsAJPD1xhb09y4k3psQ>
 - Bob & Brad physical therapy YouTube channel:
<https://www.youtube.com/user/physicaltherapyvideo>
 - Daily Practices yoga and mindfulness online courses:
<https://dailypractices.thinkific.com/collections>
- **Free/low cost video conferencing/video visit options:**
 - All the following are approved by OCR. See their website for a complete list:
<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>
 - Doxy.me, free secure, designed specifically for telemedicine:
<https://doxy.me/>
 - Zoom, free online meetings: <https://zoom.us/>
Zoom training & resources during pandemic: <https://zoom.us/docs/en-us/covid19.html>
 - RingCentral, free during pandemic, meeting, web phone: <https://www.ringcentral.com/>
 - Apple FaceTime: between Mac and iPhone users only, easiest way to video chat:
<https://support.apple.com/en-us/HT204380>
 - Skype: free video, audio to other Skype members: <https://www.skype.com/en/>
 - Microsoft Teams (previously Skype for Business): \$12/month, web video:
<https://products.office.com/en-us/microsoft-teams/online-meeting-solutions>
 - Gotomeeting: \$12/month, free trial, <https://www.gotomeeting.com/>
- **Other Resources and References:**
 - CDC publication on managing stress and anxiety during coronavirus outbreak:
<https://www.cdc.gov/coronavirus/2019-ncov/prepare/managing-stress-anxiety.html>