

Update on Fentanyl

Disclosures & CME Credit

Neither the case presenter nor the didactic presenter have conflicts of interest

Off label use of medications may be discussed

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What is Fentanyl?

- Powerful synthetic opioid
- 50-100x more potent than morphine
- Prescription drug, but most ODs from illegally-made fentanyl
- Made mostly in China (illicit)
- Mass production
- Legal through 2017

- Pill press machines make 10-18k tabs/hr Fentanyl

- Synthetic fentanyl sold as:

Powder

- Dropped onto blotter paper

- Put in eye droppers and nasal sprays

- Pressed pills that look like other prescription opioids

- Used as heroin cutting agent but some dealers mix fentanyl with other drugs

Cocaine, methamphetamine, and MDMA

- May be intentional or accidental due to cross contamination
- Because of potency, it takes very little to produce a high with fentanyl

Cheaper option; can be used as direct substitute for heroin

- Many people don't realize they are taking fentanyl; more likely to overdose

"Hot spots" in batches lead to multiple ODs

- Known use of fentanyl is also increasing
- Fentanyl –clinical implications

Patient

ED History

1

Pt with heroin use disorder, inducted on 8mg sublingual buprenorphine, became anxious & agitated, precipitated withdrawal?

2

Pt was at a party, took what he thought was cocaine, per other party goers pt became unresponsive, CPR was performed on pt and 1 mg of Narcan was given pt woke up. Has a hx of drug and alcohol abuse; states his last drink was 2 days ago

3

Per EMS pt was found down at the bus stop with another person, and was given 4mg Narcan intranasal and 2mg IV per EMS. Pt alert on arrival and states she doesn't remember taking anything, but states she took a sniff of something.

4

Pt was found unresponsive, needle found in her arm, drug unknown

Fentanyl –major challenges

- Overdose potential
- Without OUD –up to 50%
- With OUD
- Before treatment
- Despite treatment? • Narcan resistant? • Difficulty transitioning to buprenorphine
- Fentanyl use and OD deaths continue to rise in SC
- The evolving response to the opioid crisis needs to address fentanyl

- SC is leading the way with innovative initiatives to address OD deaths
 - There remains a great need to ensure access to Narcan and MOUD, but also address risk in those who may not have OUD
 - More education and guidance is needed on OD prevention for users of all substances
 - More research is needed
 - effective Narcan and buprenorphine use for pts on fentanyl
 - use of fentanyl test strips
 - peer-led post-overdose interventions
 - other innovative ways to address the lethality of fentanyl
- MUSC designates this live activity for a maximum of 1.0AMA PRA Category 1 Credit(s)[™]

MUSC will award 0.1 CEUs for this activity (1 contact hour = 0.1 CEU)

CMEs and CEUs stand 3rd FRIDAY of each month

12:00 –1:00 pm

New Module

High Quality Medicated Assisted Treatment (MAT)

November 2020 –February 2021

11/20/20

Screening and SBIRT

Sarah Gainey, MSW

12/4/20

Motivation Interviewing

Dr. Elizabeth Santa Ana

12/18/20

MAT in Primary Care: Med Management from POATS

Dr. Michael Capata

Tele-Mentoring Programs in South Carolina