

# Physician Practice Alert



August 09, 2024

## Injectable Opioid Agonist Treatment for patients with Opioid Use Disorder

### WHAT DO I NEED TO KNOW?

Injectable Opioid Agonist Treatment (iOAT) is part of the continuum of opioid use disorder (OUD) care specifically for individuals who inject opioids. It involves use of high dose injectable opioids (i.e. HYDROmorphine 200mg) administered as IV direct.

#### **Why use iOAT over other forms of OAT?**

- iOAT has higher retention in care than methadone for treatment refractory OUD.
- iOAT can be administered concurrently with other opioid medications, including oral OAT and prescribed alternatives and acute pain management.

### WHAT'S NEW:

Island Health now offers diamorphine (Diacetylmorphine or "DAM") and HYDROmorphine (Dilaudid or "HM") iOAT **continuation in hospital settings for patients who are receiving iOAT in community.**

### WHAT DO I NEED TO DO?

**iOAT prescribing workflow in hospital** (see [Prescribing Practice Support Tool](#) for more details):

1. iOAT clients are identified in PharmaNet or by patient report. *iOAT in hospital is not intended for patients who are not currently connected to a community iOAT program.*
2. Most Responsible Physician (MRP) puts in referral to the Addiction Medicine Consult Services (AMCS).
3. Physician (MRP, if AMCS not available) assesses patient including current medications and substance use.
4. Physician **must call community iOAT** provider (250-883-9098; [iOAT Safer Contact list](#)) to confirm last dose, as PharmaNet may not accurately reflect missed iOAT doses.

**Important Note:** *Hospital team should work closely with the community iOAT provider early in admission to coordinate care while in hospital and for discharge planning. Nurses may require reassurance and discussion to feel comfortable administering high dose IV opioids and ensure appropriate post-dose monitoring can happen.*

5. Physician (MRP, if AMCS not available): complete the iOAT Clinical Order Set (COS) or if iOAT cannot be immediately continued, order interim opioid medication management – see [Prescribing Practice Support Tool](#) (PST).
  - a. **iOAT Continuation can be ordered by MRP after direct consultation with an Addiction Medicine specialist** ([AMCS](#), [BCCSU](#), or [RACE](#)). Formal training is not required by CPSBC to continue iOAT prescriptions in hospital.
  - b. iOAT cannot be initiated or re-started by MRP without addiction medicine training.
  - c. Select intensity of post-dose monitoring required as per [PST](#). Most medically stable patients qualify for de-intensified monitoring.
  - d. Continue oral OAT and opioid medications as per clinical assessment.

### PRACTICE SUPPORT RESOURCES FOR PHYSICIANS

The [iOAT staff intranet](#) is a resource hub for hospital physicians and nurses providing care to iOAT patients. This includes the [Prescribing Practice Support Tool](#). If interested in an iOAT education session, please reach out to [amsu@islandhealth.ca](mailto:amsu@islandhealth.ca).

Immediate Support Contacts	Additional Non-Urgent Support or to provide feedback on iOAT practice resources:
<ul style="list-style-type: none"> <li>• <a href="#">AMCS</a> prescriber or nurse (if available)</li> <li>• BC Centre on Substance Use <a href="#">24/7 line</a> (if after hours) (nurses and prescribers): 778-945-7619</li> <li>• Local inpatient Pharmacy</li> <li>• RACE line (prescribers only): 604-696-2131</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="mailto:Courtney.Amoraal@islandhealth.ca">Courtney.Amoraal@islandhealth.ca</a> – Regional Clinical Nurse Educator, Addiction Medicine &amp; Substance Use</li> <li>• <a href="mailto:AMSU@islandhealth.ca">AMSU@islandhealth.ca</a> – Addiction Medicine &amp; Substance Use general inbox</li> <li>• Medication Safety Questions: <a href="mailto:MedicationSafetyConsultants@islandhealth.ca">MedicationSafetyConsultants@islandhealth.ca</a></li> </ul>