

VCH Public Health Response to Withdrawal Management During a Pandemic Guidelines

Notification to all prescribers in the Vancouver Coastal Health (VCH) region

GOAL

People in the Downtown Eastside (DTES) are doing their part to reduce the transmission of COVID-19 by self-isolating; we need to do our part in supporting them. VCH has new guidelines in place to help prescribers supporting people who use drugs (PWUD) who may experience withdrawal symptoms while in self-isolation due to COVID-19.

*The following guidelines are currently NOT intended for treatment of substance use disorders.
This is for withdrawal management during self-isolation.*

VCH, in partnership with BCCSU and MoH, has developed Pandemic Public Health Withdrawal Management Guidelines for health care providers working with people who use drugs (PWUD) who need to self-isolate due to COVID-19. These prescribing guidelines have received provisional endorsement by the B.C. Ministry of Health and the Office of the Provincial Health Officer.

As a prescriber, you can follow these guidelines legally. By doing so, you will help support a vulnerable community, help them prevent the spread of COVID-19, and save lives.

VCH has outlined the following **eligibility criteria for enrolment**:

- › Confirmed COVID-19 positive on self-isolation, or
- › Suspect case awaiting diagnosis for COVID-19, or
- › At risk of COVID-19 infection, or
- › Has upper respiratory symptoms and is self-isolating as per public health guidelines

AND one or more of the following:

- > History of active substance use disorder (opioids, stimulants, or alcohol)
- > Deemed at high risk of withdrawal and/or overdose or with significant cravings that would put them at increased risk, via a detailed clinical assessment
- > Have not been able to achieve a therapeutic dose with currently available OAT treatment, or treatments have not been beneficial
- > Experiencing homelessness or living in a shelter, SRO or supported housing unit
- > Deemed unable to stay in self-isolation without an adequate supply of substances and who are assessed as a risk for breaching self-isolation

Youths age <19 and pregnant individuals are eligible if:

- > There is informed consent by the client to receive treatment from the guideline and additional education about the risks associated with this population.
- > In collaboration with the client, there is referral to health and social services and connection to resources related to their population.

ENROLMENT AND PRESCRIBING



Attached Clients

Clients will be encouraged to work with their existing family physician or nurse practitioner who can use the outlined pharmacotherapy protocols and pharmacy delivery as per their already existing process.



Unattached Clients (or GP declines to prescribe)

Clients will be connected to the Overdose Outreach Team (OOT).



Prescribing Support

Specialist phone consult service can be accessed via the Overdose Outreach Team (OOT) at:

604.360.2874

Available Mon. – Sun., 8 a.m. – 8 p.m.

PANDEMIC PHARMACOTHERAPY PROTOCOL

Note: All medications in this protocol are now covered under Plan G. If you prescribe any medications outside of this protocol, you should ensure that they are covered under Plan G.

Substance Use Disorder	Pharmacotherapy Options
Opioids	<ul style="list-style-type: none">› Offer Opioid Agonist Therapy (OAT): Kadian, methadone, suboxone (as per BCCSU guideline) <p>If patient declines standard OAT or is using opioids in addition to their OAT, the following are approved for temporary use:</p> <ul style="list-style-type: none">› Oral hydromorphone 8 mg tablets (1-3 tabs q1h as needed, up to 14 tablets; daily dispensed)› M-Eslon 80 - 240 mg BID; daily dispensed <p><i>Make the initial prescription 19 days in length. Doses can be titrated up as needed based on patient requirement.</i></p>
Stimulants	<ul style="list-style-type: none">› Dextroamphetamine 10-20 mg BID SR; daily dispense (max dose of 60 mg BID per day)› Methylphenidate IR 10-20 mg BID; daily dispensed (max dose of 100 mg/24 hours)› Methylphenidate SR 20-40 mg once daily; daily dispensed (max dose 100 mg/24 hours) <p><i>Make the initial prescription 19 days in length.</i></p>
Illicit Benzodiazepines	<p>Enquire which benzodiazepine the patient is using per day and aim to prescribe according to current use.</p> <p>For example, if a patient describes buying diazepam 10 mg, three times a day, then consider starting diazepam 5 mg TID; daily dispensed.</p> <p><i>Make the initial prescription 19 days in length. Lower starting dose accounts for variability of potency of street benzodiazepines. Doses can be titrated as needed. Please be aware of increased overdose risk.</i></p>
Alcohol <i>Includes those using non-beverage alcohol</i>	<p>Managed alcohol program or daily dispensed alcohol</p> <p>If your patient is living in supportive housing, please connect with their housing support to determine if they can help obtain and provide alcohol.</p> <p><i>Dosing dependent on individual use, to be evaluated on a case-by-case basis. If the individual is drinking 6-10 beers per day, provide an average dose. If you need support in helping your patient obtain managed alcohol, please call OOT.</i></p> <p>If low risk of complicated withdrawal (PAWWS score ≤ 3), consider withdrawal management:</p> <ul style="list-style-type: none">› Gabapentin and/or› Clonidine and/or› Carbamazepine <p>Refer to BCCSU guidelines.</p>

Substance Use Disorder	Pharmacotherapy Options
Cannabis	Support clients to place an online order via an existing retailer such as bccannabisstores.com
Tobacco	<ul style="list-style-type: none"> > Nicotine replacement therapy (patch, gum, lozenges, inhaler) > If NRT declined: offer a pack of cigarettes.

WHAT IS YOUR ROLE?

- > If you currently care for people who meet eligibility criteria, you can immediately apply these new guidelines to ensure your client's substance use needs are met during self-isolation.
- > If you know of people who are currently not connected to a GP/family doctor who may meet eligibility criteria, please refer them to the VCH Overdose Outreach Team (OOT) at 604.360.2874.

RESOURCES TO SUPPORT YOU

We are here to help you implement these new prescribing guidelines. We have a clinical consult service available to help answer any questions. To access, please contact the VCH Overdose Outreach Team (OOT) at 604.360.2874.

At this time, the VCH specialist physician and OOT have limited capacity and can only manage patients that are COVID-19 confirmed positive or suspected cases awaiting diagnosis of COVID-19. This may change in the future.

If your patient has other social needs that must be addressed to support self-isolation and you need help in coordinating this, or if you have any other questions, please contact OOT.

PRESCRIPTION CHECKLIST

- Is the right medication and strength on the prescription?
- Is the total dose correct?
- Does the prescription have the right dates?
- Is the prescription written as daily dispensed?
- Does the patient's pharmacy have adequate supply of the substitution medication?
- Does the patient's pharmacy have the ability to deliver medication daily?
- Does the patient have Plan G coverage to fill the prescription?