

Welcome to Virtual Colorado MAT Forum

- *As you join you will be muted*
- *Please unmute yourself by clicking on the microphone icon for asking questions and participation in discussions.*
- *You may also put your questions and comments in the Chat box.*
- *We encourage active participation!*

Monthly Webinars

- ***Virtual CO MAT Learning Forum***

1st Thursday 12:30pm-1:30pm (NEXT **January 7, 2021**)

- ***Induction Basics: Tips from the Trenches****

2nd Tuesday 7:30am-8:30am (NEXT **December 8, 2020**)

* *same topic each month*

- ***Denver Health Addiction Learning Collaborative***

3rd Wednesday 12:15pm-1:15pm (NEXT **Nov 18, 2020**)

Denver Health Addiction Journal Club

- ***Scheduled dates for 2020***
 - *Every fourth Tuesday January-October*
 - *November 10th*
 - *December 8th*
- **Time; noon to 1 pm**
- To join; email ITMATTTRs2@UCDENVER.EDU
 - See our website for previous presentations & resources as well as upcoming topics
 - <https://www.practiceinnovationco.org/itmatttrs2/mat-forum/>

Webinars

- See our website for previous presentations & resources as well as upcoming topics
- <https://www.practiceinnovationco.org/opioids/mat-forum/>

MAT Learning Forum: Case Presentations

Donna Goldstrom, Lesley Brooks

11/5/2020

Sally Smith

- 47 yr old Female, currently looking for work.
- Married with 2 teenage sons. Family history of adopted mom MDD and OUD, unknown bio mom. Also taking Lamictal.
- Dx - F11.20 on Zubsolv for 6 years. Up and down stability throughout that time, several relapses on a variety of substances including meth, last relapse 6 months ago.
- Back and forth engagement with counseling.
- Multiple attempts to taper off buprenorphine due to patient request, successfully tapered from 24mg Suboxone to 17mg Zubsolv daily.

Sally Smith

- Continuously misses appointments, reschedules visits with counselor, runs out of medicine and states goes through withdrawal.
- Regularly requests a taper but not appear stable enough to manage one. States that she is in a much better position than in the past, which is true, getting along better with husband, sons are doing well in school, feeling confident about getting a job
- Consistently unstable regarding counseling, attending appointments, and compliance with medicine. Last relapse was with her sister who also has severe SUD. Still has contact with her sister.

John Smith

- 33 yr old Male, currently working in construction.
- No significant relationship, lives alone.
- Dx - F11.20 on 16mg Suboxone daily for 8 years. Has tried to taper off multiple times unsuccessfully.
- Has dramatically increased his life circumstances, now has woodworking hobbies, attends 12 step groups regularly, significantly improved relationship with parents and friends.
- Has expressed great anxiety in thinking about a taper yet states a desire to at every visit. Currently takes Zoloft and states that it helps him “calm down”.

Walter Reed

- 34 yr old Male, homeless, multiple episodes in jail and residential treatment including long term at Ft Lion.
- Dx - Fll.20 as well as amphetamine use disorder, MDD, and PTSD. Suboxone 24mg daily, plus Lexapro and mirtazapine.
- On and off seeing primary care and psych, on and off counseling and 12 step attendance, unstable relationships, occasional employment.
- Attends appointments and appears to take Suboxone daily but has increased instability in life circumstances ongoing.
- Family history of alcoholism and no communication with family currently. Moves back and forth from the Fort Collins clinic to Greeley clinic.
- Multiple admissions to the hospital for a variety of medical issues.

Darren

- 52y M with obesity, severe depression/anxiety and longstanding knee arthritis, spinal stenosis.
- Started on opioids after failing NSAIDs, steroid injections, PT. Has not worked in >10yrs.
- Transfer to our clinic on 360meq. Unsanctioned dose escalations leading to requests for early refills. Complaint of pain largely unchanged. 2 psych hosp for severe depression and Rx misuse.
- Most of day is sedentary (“because of the pain”) unless going to medical appointments.

Darren

- He admits he has been unable to take pills as prescribed. Thought he would be able to get off pills and get back to work but has been unsuccessful.
- He fights with his son-in-law over taking care of grandkids which he used to do. He is irritable when he runs out of meds, then spends a lot of time in room/isolating.
- His depression and energy are worse over last few years on pain meds.

Questions about Darren

- Is he benefiting from opioids?
- What are the risks of continuing opioids?
- Do his 'red flag' behaviors constitute a use disorder?
- What are his options?

Question

- Based on this information, do you think Darren meets criteria for an opioid use disorder?
 - A. No
 - B. Yes, mild use disorder
 - C. Yes, moderate use disorder
 - D. Yes, severe opioid use disorder
 - E. Not sure

Darren – A bumpy but largely successful journey

- Induced on buprenorphine (Suboxone). Attends suboxone med refill groups. Has a bx health therapist on/off. Home health nurse on/off.
- Insight around substance use varies. Sometimes accepting. Still c/o pain.
- Still fighting with his son-in-law, isolating.
- Hosp for inhalation injury & burns s/p smoking while wearing O2.
- Pending: pulmonary rehab, bx health club house.
- Smoke free @ 11 mos now smoking again.

Helen

- 33y F w/ hx anxiety, ADD, learning disability, back pain, polysubstance use
- Age 22-24: Vicodin for back pain, 1st child, benzo prn anxiety, working
- Age 26: anxiety, concentration worse, Ritalin, regular benzo, homeless/couch surfing, baby w/ BF, severe dep
- Age 28: jail, polysubstance use (cocaine)
- Age 29: IV heroin, illicit suboxone, rehab, jail
- Age 32: pregnant, G2P1, goes to jail @ 30wks (placed on methadone), released 2AM, chooses to d/c methadone, BF in jail

Helen

32y G2P1

- Chooses to maintain abstinence after jail
- Engages in treatment with bx health
- US 32 wks: multiple fetal abnormalities, gastroschisis delivery at TCH (Denver)
- Started on buprenorphine post partum
- CPS involvement
- Boyfriend released from jail, chooses to cut ties
- Continues to engage with bx health, completed IOP, CPS no longer involved
- Doing well. Wants to help others.

Karen

- 24y F w/ hx scoliosis, ankle surgery, depression/anxiety, polysubstance use (opioids, methamphetamines, ecstasy)
- Age 12-15: Opioids (oxycontin), never rx'd, sexually active, dropped out of school, no job
- Age 18/19: heroin use (IV), crime? community corrections, homeless
- Age 20: suboxone only program, intermittent relapse
- Age 24: pregnant, G1P0, continues suboxone, BF involved early on only

Karen

24y G1P0

- Maintained on bupe during pregnancy
- Pregnancy progression WNL – Had multiple heroin relapses
- Need for IOL (Induction of Labor) at @ 39/40 wks
 - Terrified, does not show until 42wks
- Normal delivery w/ baby in NICU for NAS x 10-14 days
- Post Partum:
 - Continued to struggle with relapse
 - Loses custody, baby cared for by GM
 - Boyfriend overdoses, dies
 - Overdose
 - Now on methadone, did better but still struggled (methamphetamine, heroin)
- Recent: completed residential treatment, has had 1 episode of use, now re-engaging

Questions?

Future Topics?

Substance Use Warmline

Free and confidential consultation for clinicians from the Clinician Consultation Center at San Francisco General Hospital focusing on substance use in primary care.

855-300-3595

Weekdays, 7am-6pm MST


Weekend or after-hours callers receive a call back the next business day.

Examples of Support:

- Diagnosis of Opioid Use Disorder (OUD) and Alcohol Use Disorder (AUD).
- Starting or adjusting MAT for OUD and AUD.
- Managing withdrawal from substances.
- Dealing with co-occurring substance use and mental health issues.
- Substance abuse in special populations like pregnancy and teens.
- Approaches to people misusing stimulants.
- Managing patients living with substance use and chronic pain.

<https://nccc.ucsf.edu/clinician-consultation/substance-use-management/>



Search... 

[Login](#) | [Register](#) | [Donate](#)

[Clinician Consultation](#)

[Clinical Resources](#)

[About the Center](#)

You are here: [Home](#) > [Clinician Consultation](#) > [Substance Use Management](#)

Substance Use Management



Clinically supported advice on substance use management for healthcare providers

Peer-to-peer consultation from physicians, clinical pharmacists, and nurses with special expertise in substance use evaluation and management.

Submit a Case for Consultation

Send a CCC clinician your case online.

[SUBMIT](#)

Call for a Phone Consultation

(855) 300-3595
Monday – Friday, 9 a.m. – 8 p.m. ET

[CALL](#)

California-based clinicians, please visit our [California Substance Use Line](#).

Resources

- General information about buprenorphine treatment and the treatment of addiction are available through numerous sources, including but not limited to:
- SAMHSA website (<https://www.samhsa.gov/medication-assisted-treatment>)
- American Society of Addiction Medicine website (www.asam.org)
- American Academy of Addiction Psychiatry website (www.aaap.org)
- Colorado Consortium for Prescription Drug Abuse Prevention (<http://www.corxconsortium.org/>)