

Intro to ECHO® and Opioids

Monday, January 22nd, 2024



Notice: AI Features in Trainings



- ▶ Per University of California policy, the use of artificial intelligence (AI) features, such as meeting summaries, are not allowed in virtual meetings and webinars.
- ▶ Attendees who enable AI features will be asked to turn them off or they may be removed from the training.
- ▶ Thank you for your understanding as we navigate this new frontier!

Indigenous Land Acknowledgement

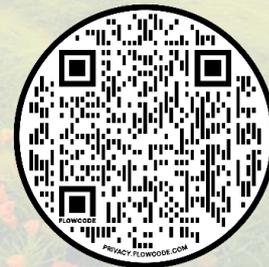
- We respectfully acknowledge that we live and work in territories where Indigenous nations and Tribal groups are traditional stewards of the land.
- Please join us in supporting efforts to affirm Tribal sovereignty across what is now known as California and in displaying respect, honor and gratitude for all Indigenous people.

Whose land are you on?

Option 1: Text your zip code to 1-855-917-5263

Option 2: Enter your location at <https://native-land.ca>

Option 3: Access Native Land website via QR Code:





What we say and how we say it inspires the hope and belief that recovery is possible for everyone.

Affirming, respectful, and culturally-informed language promotes evidence-based care.

PEOPLE FIRST

Language Matters

in treatment, in conversation, in connection.



Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

20 **KINGHOLIDAY**

24 JANUARY 4TH - JANUARY 15TH

IT STARTS WITH ME:

SHIFTING THE CULTURAL CLIMATE THROUGH
THE STUDY AND PRACTICE OF KINGIAN NONVIOLENCE



NATIONAL HUMAN TRAFFICKING

PREVENTION MONTH

The U.S. Department of Health and Human Services' theme for Human Trafficking Prevention Month 2024 is **Activate Connections to Prevent Human Trafficking**. The theme will focus on activating connections to build individual, family and community resilience to human trafficking.

UCLA ISAP MAT ECHO® Hub Team



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Disclosures

None of the presenters, planners, or others in control of content for this educational activity have relevant financial relationships to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



Objectives

Describe	Describe at least three (3) acute and chronic effects of opioids.
Provide	Provide examples of at least five (5) symptoms of OUD.
List and explain	List and explain at least two (4) ways health care teams can address OUD.
Identify	Identify least two (2) lessons learned from case discussion.

Medications for Addiction Treatment (MAT) ECHO® 2024



The MAT ECHO® Clinic occurs on the 4th Monday of each month 12-1PM (PT).

The objective of this clinic is to offer a monthly opportunity for MAT providers and treatment teams to learn evidence-based practices to treat opioid, stimulant, and other substance use disorders through didactic and case-based learning. Participants are strongly encouraged to bring clinical questions for discussion.

Date	Topic
January 22	Intro to ECHO® and Opioids
February 26	Treatments for OUD
March 25	Overdose Prevention and Harm Reduction
April 22	Risk Reduction: Naloxone
May 27	Health Equity and MAT
June 24	Treating Stimulant Use Disorder
July 22	Treating Pregnant Women
August 26	Nurse Care Model
September 23	Multidisciplinary Treatment Teams
October 28	Additional Resources/Stigma Reduction
November 25	Emerging Topics

Use the QR code below to view the program and register:



2024 Curriculum

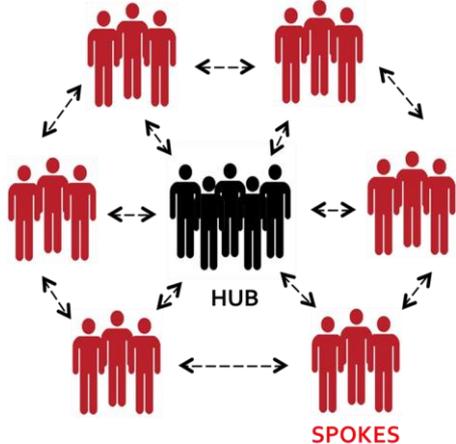
Hub Team Members: Gloria Miele, PhD, Kawika Liu, MD, JD, Heather Momberg, DNP RN, Christian Frable, AMFT, Beth Rutkowski, MPH, and Thomas E. Freese, PhD

The UCLA OASIS-TTA Program is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) State Opioid Response SOR 3 Grant to the California Department of Health Care Services (DHCS). The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the California Department of Health Care Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the CA Government.



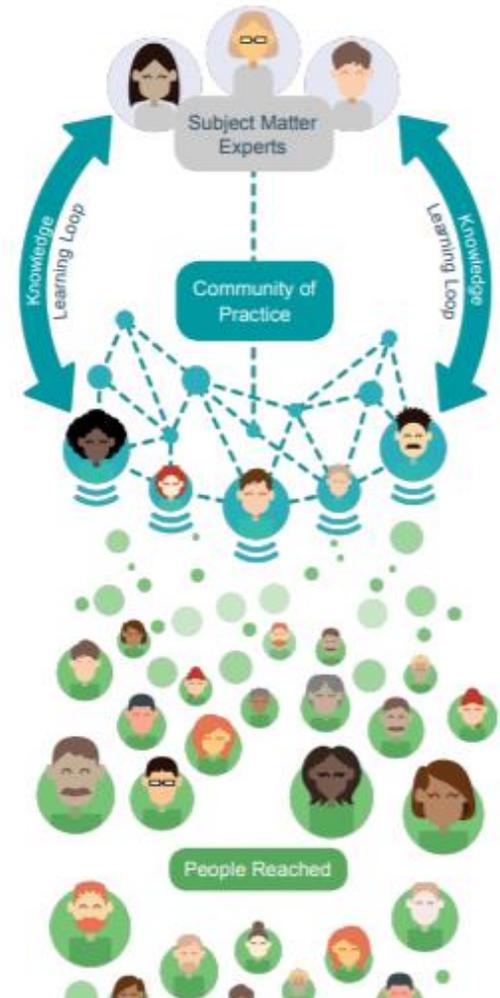
What is ECHO?

It is a knowledge-sharing network, led by teams of experts who use a videoconference-driven practice model to empower local health professionals.



ECHO Model:
All teach
All learn

The ECHO Model™



Project ECHO's Aspirations

To democratize medical knowledge and dramatically improve access to best practice care to underserved people all over the world.

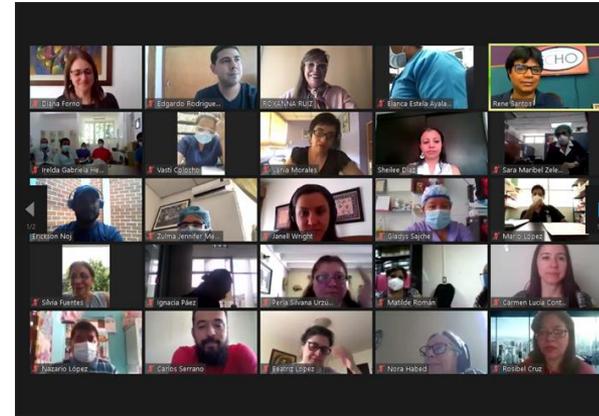
Project ECHO's goal is to improve the lives of 1 billion people by 2025.

Core Beliefs:

The right knowledge at the right place, at the right time can save millions of lives.

The benefits of knowledge are a social good that should be available to everyone.

Together, ECHO empowers local communities to access expert knowledge wherever they live.





ECHO Movement

Active Today



Reach Metrics

7/3/2006 to 2/26/2021

Learners	Organizations	Communities	Countries
179,444	36,694	8,686	169
Learning Hours	Attendances	Sessions	Programs / Cohorts
2,084,563	1,385,757	48,731	2,817

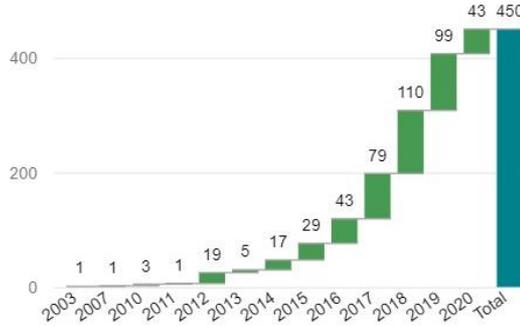
Average Session

Learners	Cases	Duration
28	1.1	90 minutes

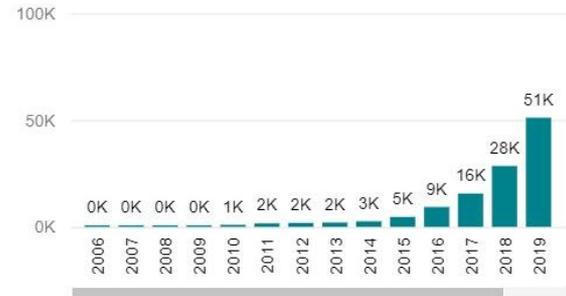
Average Learner

Attendances
6

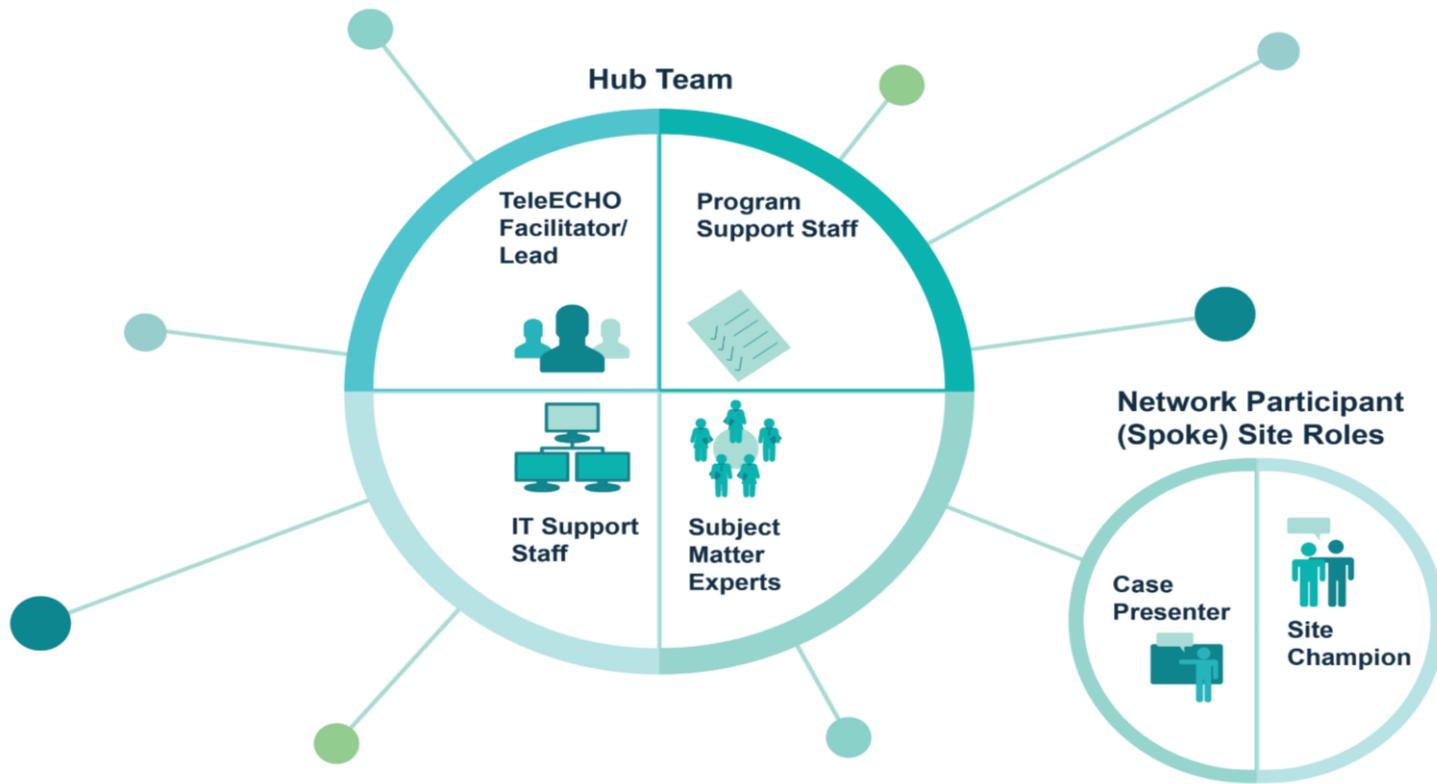
Hubs Launched per Year



Learners per Year



TeleECHO Session - Composition



iECHO Help Center



iECHO Help Center for Hubs

 Home 



 Welcome ECHO Hub!

Here's where you can find information on how to use iECHO to manage your ECHO program, including:

- How to log in and create a profile
- How to manage an ECHO program
- Data Privacy and Legal
- Organization and Team Management

Our support team is ready to assist you with any additional questions via support@iecho.org

Please note: Currently, every three weeks we roll out new and/or improved features to iECHO. We share information about those updates via our [Release Notes](#) and an email to all registered users.



Clinical Question Template



California Medications for Addiction Treatment (MAT) ECHO Clinic

— CLINICAL QUESTION TEMPLATE —

Date: / / Presenter: /

Hub Name: Spoke Name: FIRST LAST

Patient Pseudonym: ECHO ID: Age:

Gender: Check if follow-up to a previously presented case

What are your main questions?

Mental health, substance use, and treatment history:

Medical history and pertinent examination findings:

What are Opioids?



Natural Opiates

- Alkaloids, nitrogen-containing base chemical compounds that occur in plants such as the opium poppy.
- Examples: morphine, codeine, etc.



Semi-synthetic Opioids

- Created in labs from natural opiates.
- Examples: Hydrocodone, oxycodone, heroin (which is made from morphine).



Fully Synthetic Opioids

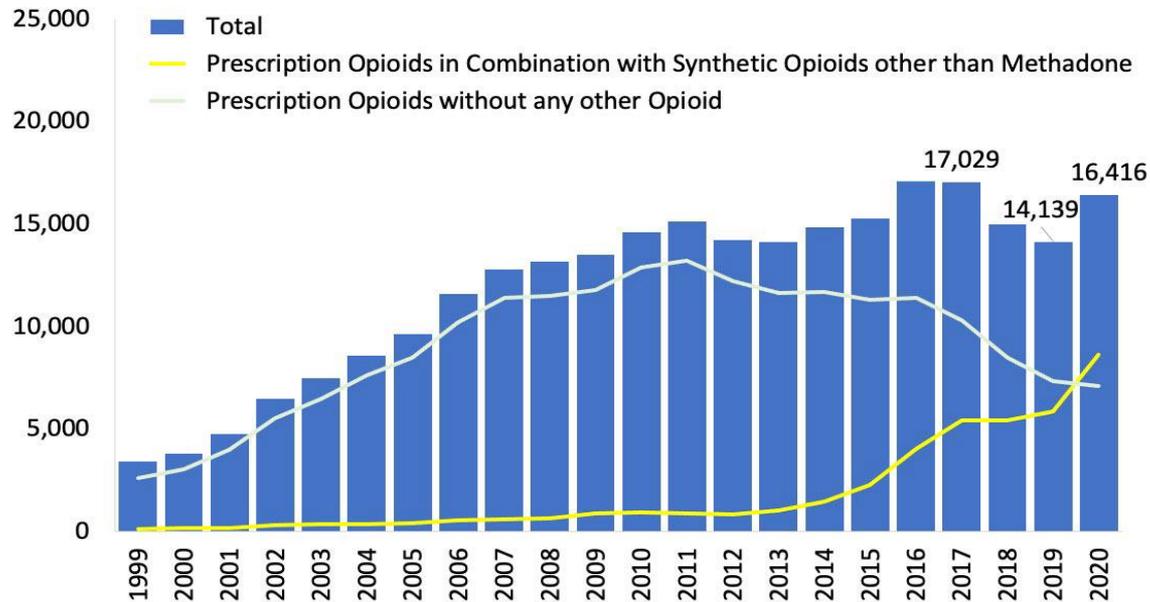
- Made entirely in a lab, void of natural opiates.
- Examples: Fentanyl and methadone.

Heroin, Fentanyl and Carfentanil



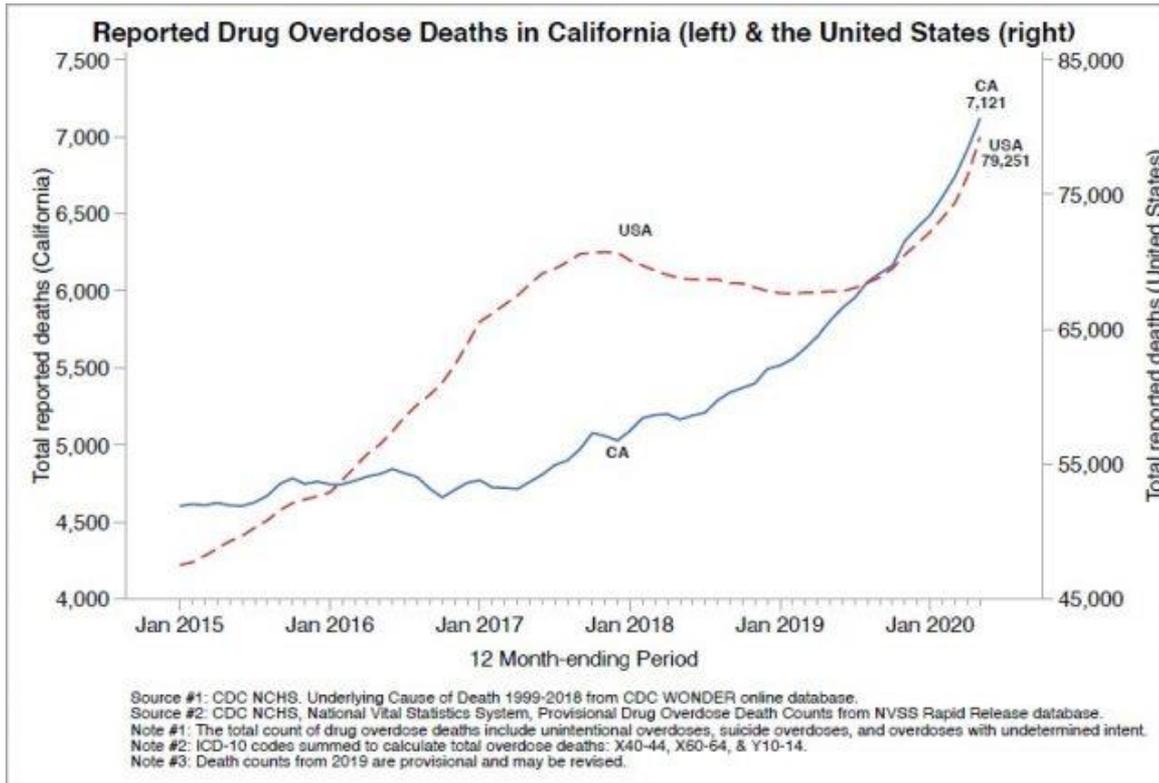
National Overdose Statistics

Figure 4. National Overdose Deaths Involving Prescription Opioids*, Number Among All Ages, 1999-2020

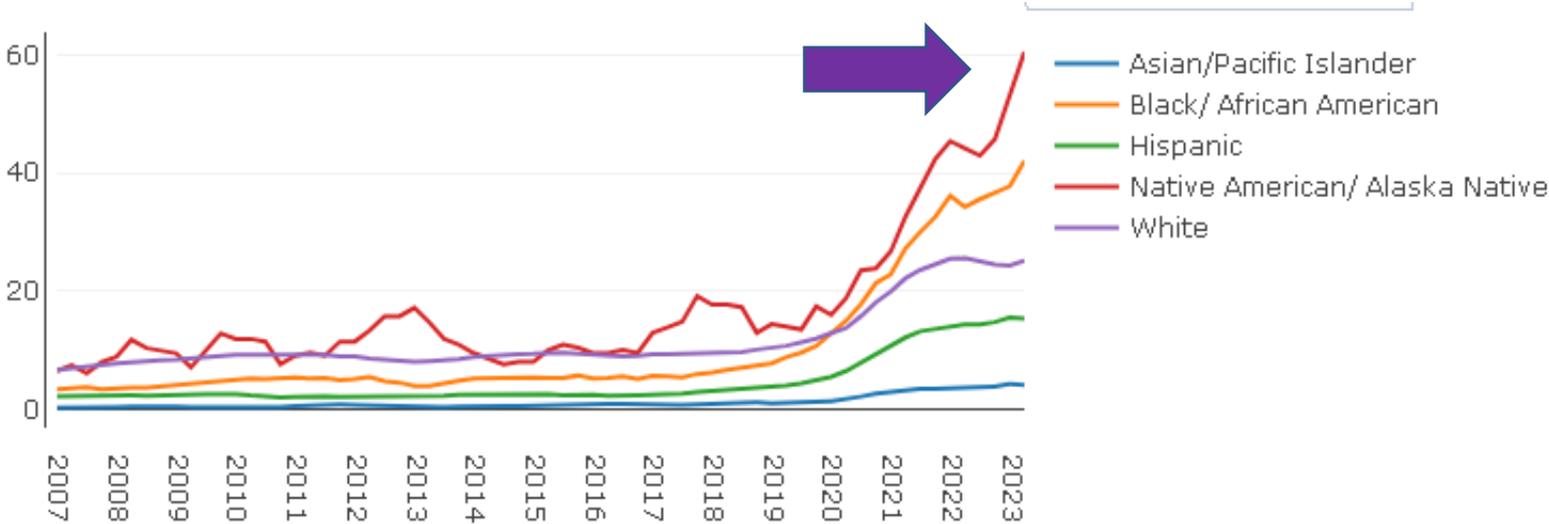


*Among deaths with drug overdose as the underlying cause, the prescription opioid subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2) or methadone (T40.3). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2020 on CDC WONDER Online Database, released 12/2021.

California Overdose Statistics



Drug Overdose Mortality By Race/Ethnicity, 1999-2020



California Overdose Surveillance Dashboard. Prepared by California Department of Public Health (CDPH - Substance and Addiction Prevention Branch (SAPB)). Accessed on 1/20/24. <https://skylab.cdph.ca.gov/ODdash/>.



● ● ● | Signs and Symptoms of opioid intoxication

- ◆ Analgesia
- ◆ Euphoria
- ◆ Miosis ('pinned' pupils)
- ◆ Constipation
- ◆ Sedation
- ◆ Itching, red eyes (histamine release)
- ◆ Respiratory depression and reduced cough reflex
- ◆ Decreased level of consciousness ('on the nod')
- ◆ Hypotension/bradycardia



Symptoms of Opioid Withdrawal



Nausea and cramping



Anxiety



Vomiting



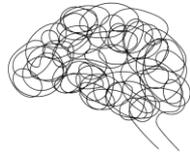
Insomnia



Irritability



Muscle aches and joint pain



Impaired	Overdose
Relaxed muscles	Breathing is very infrequent or has stopped and the pulse is slow.
Slowed or slurred speech	Deep snoring or gurgling
Sleep/fatigue	The skin is pale and clammy
Nodding	Loss of consciousness
Reduced heart rate	Heart rate is slow, erratic or non-existent.
Responsive to stimulation like yelling, sternal rub, pinching	Unresponsive to stimulation

Overdose

Oxygen starvation leads to:
Unconsciousness



Coma



Death

Within 3-5 minutes without oxygen, brain damage starts to occur, soon followed by death

(Harm Reduction Coalition, n.d.)



University of California Los Angeles
Integrated Substance Abuse Programs

Opioids: Long-term Effects

- ▶ Substance use disorder
- ▶ Infectious diseases, for example, HIV/AIDS and hepatitis B and C
- ▶ Collapsed veins
- ▶ Bacterial infections
- ▶ Abscesses
- ▶ Infection of heart lining and valves
- ▶ Arthritis and other rheumatologic problems

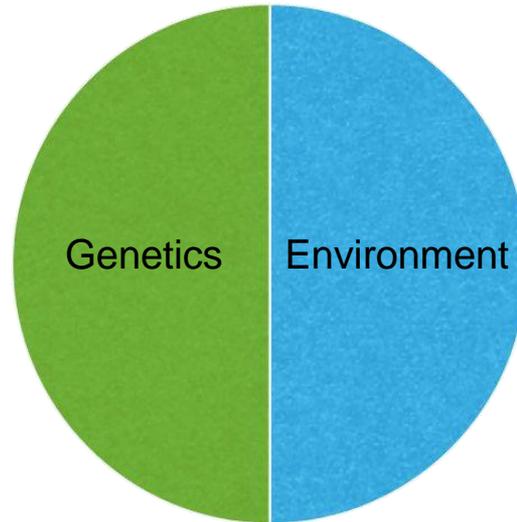
Vulnerability to SUDs

Biochemical

- opioid receptors
- dopamine
- other transmitters
- intracellular signals

Behavioral

- novelty seeking
- harm avoidance
- impulsivity
- psychiatric disorders



Social influence

- parents
- siblings
- friends

- Adverse Childhood Experiences (ACEs)
- psychiatric disorders
- stressors
- lack of positive experiences

Availability

- illicit sources
- prescription
- family and friends

Anokhin et al., 2015
Milivojevic et al., 2012
Reed et al., 2014
Volkow et al., 2016

DSM-5 Criteria for SUDs

Loss of control

- more than intended
 - amount used
 - time spent
- unable to cut down
- giving up activities
- craving

Physiology

- tolerance
- withdrawal

Consequences

- unfulfilled obligations
 - work
 - school
 - home
- interpersonal problems
- dangerous situations
- medical problems

formerly “dependence”

formerly “abuse”

- A **substance use disorder** is defined by having 2 or more • in the past year resulting in distress or impairment.
- **Tolerance** and **withdrawal** alone don't necessarily imply a disorder.
- Severity is rated by the number of symptoms present:

[2-3 = mild
	4-5 = moderate
	6+ = severe

Self-Paced Learning Opportunities

Individualized Learning Plan: MATE ACT

Medication Access and Training Expansion (MATE) Act
Trainings to meet the 8-hour DEA requirement

- **The Intersection of DEA & MAT** (1.5 credit hours)
- **Addressing Fentanyl Use In Primary Care** (1.0 credit hour)
- **Structural Competency: Medicine for the Inequalities that are Making Us Sick** (1.0 credit hour)
- **Advancing Equity in Substance Use Disorder Treatment** (1.0 credit hour)
- **Addressing Stimulant Use in Primary Care Settings** (1.0 credit hour)
- **Methamphetamine Use and Affective Disorders** (1.0 credit hour)
- **Trauma-Informed Care** (1.0 credit hour)
- **Homelessness and Substance Use Disorder in Veterans** (1.0 credit hour)



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Learning



Individualized
Learning
Plans

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Integrated Substance Abuse Programs



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