

VA HEALTH CARE SYSTEM, DETROIT

INNOVATIVE APPROACH TO FIGHT OPIOID EPIDEMIC

COMPLIMENTARY AND ALTERNATIVE MODALITIES

BASSAM BATARSE, MD. MEDICAL ACUPUNCTURIST

VA HEALTH CARE SYSTEM

144

Hospitals

1221

OP Centers

8.97 Millions

Registered (2015)

20.4 Millions

Total Veterans (2016)

\$200 Billions

Budget

CHRONIC PAIN IN VA HCS

Chronic Pain Prevalence

30% in Non VA Population

55% in Veterans (60% in Female Veterans)

CHRONIC PAIN IN VA HCS

Veterans' pain is more often severe and complex, and often associated with psychiatric and medical comorbidities

OPIOID USE IN VA HCS

Prevalence:

2012 (VA Peak)

21.2% (Compared to 14.5 % Non VA)

<https://analytics.ncsu.edu/sesug/2015/PH-182.pdf>

OPIOID USE IN DETROIT VA

QTR 1 - 2014

Detroit VAMC 24.8 % (6874 Veterans)

VA Nationally 16.2%

2, Highest in the Nation

OPIOID USE IN VA HCS - DETROIT

Higher Doses

- ❑ 2.2% (150 veterans) over 400 mg MEDD
(compared to 0.3% VA national rate)
- ❑ The highest dose prescribed **3460** mg MEDD

OPIOID SAFETY INITIATIVE BOARD (LATE 2014)

(To curb the use of opioids in general and to reduce doses to safe levels)

- Multidisciplinary Group
 - Weekly
 - Reviewed all those Veterans on 200mg MEDD or more (over 500)
 - Sent tailored letters with recommendations to prescribers
 - Re-Reviewed in 6 months for compliance
- Created a Multidisciplinary Pain Clinic to support opioid prescribers
- Quantitative UDS (Ameritox)

And Introduced CAMs

CIM

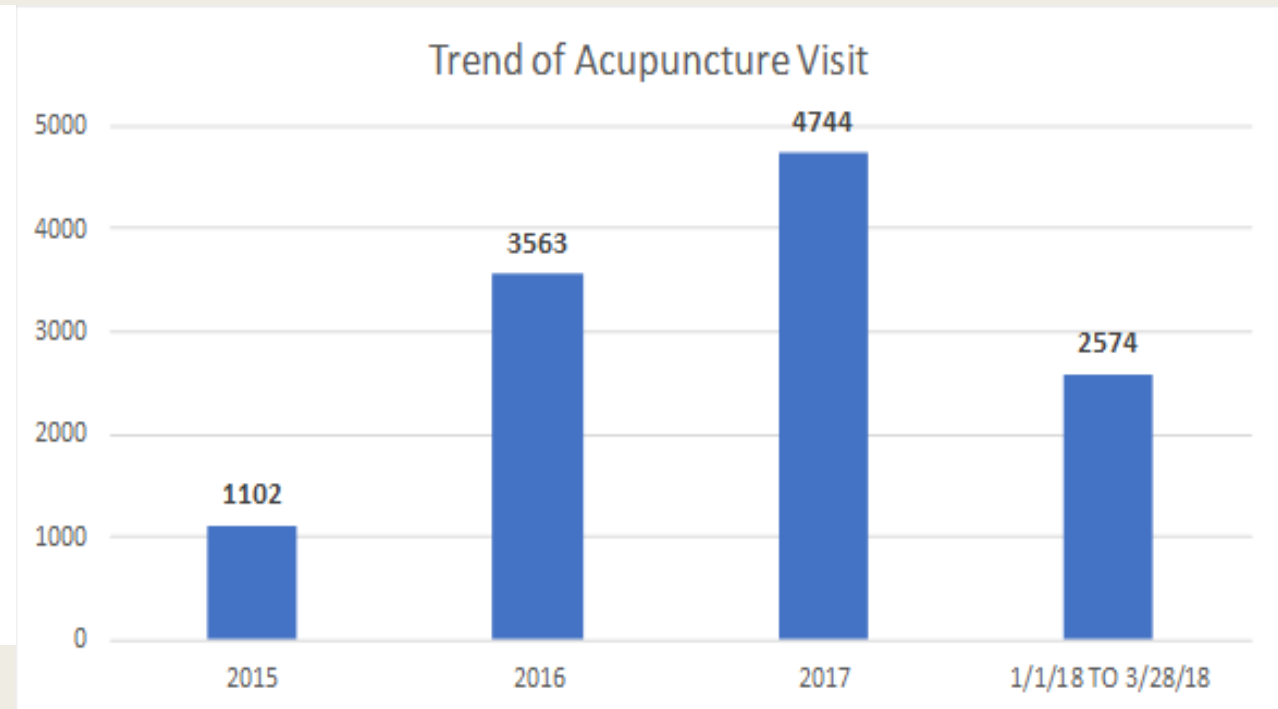
- Acupuncture
- Auricular Acupuncture (BFA and NADA)
- Yoga
- Chiropractor Care
- Aroma Therapy
- Healing Touch
- Biofeedback
- Others (reiki, Tai Chi, Music therapy,)

ACUPUNCTURE

2015 1 - 3 providers
2017 11 providers

80 Hrs a week pain area

ED/FT, CLC, MH, PC, ,
Ortho Surgery, OR,
Research

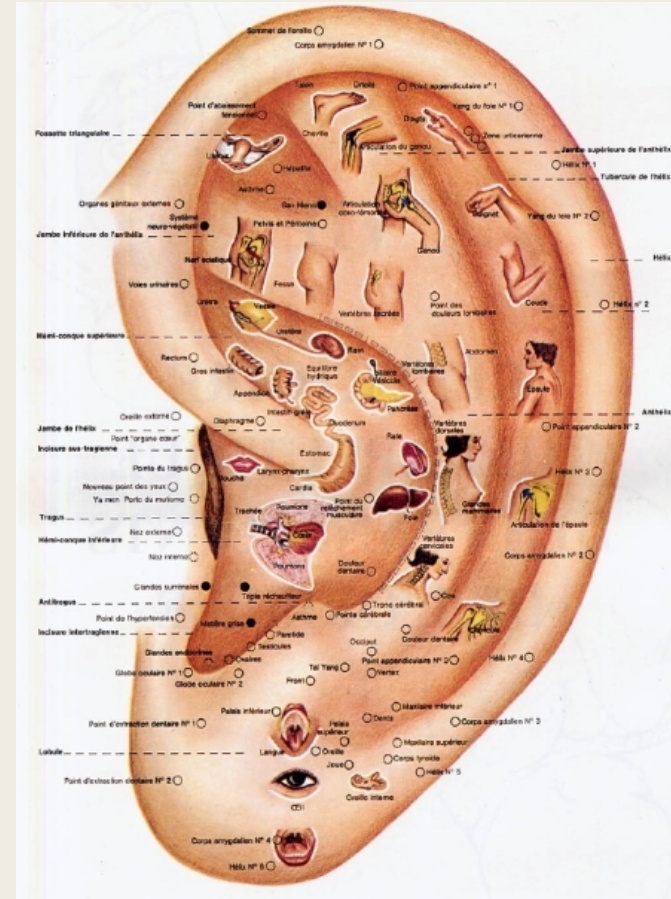
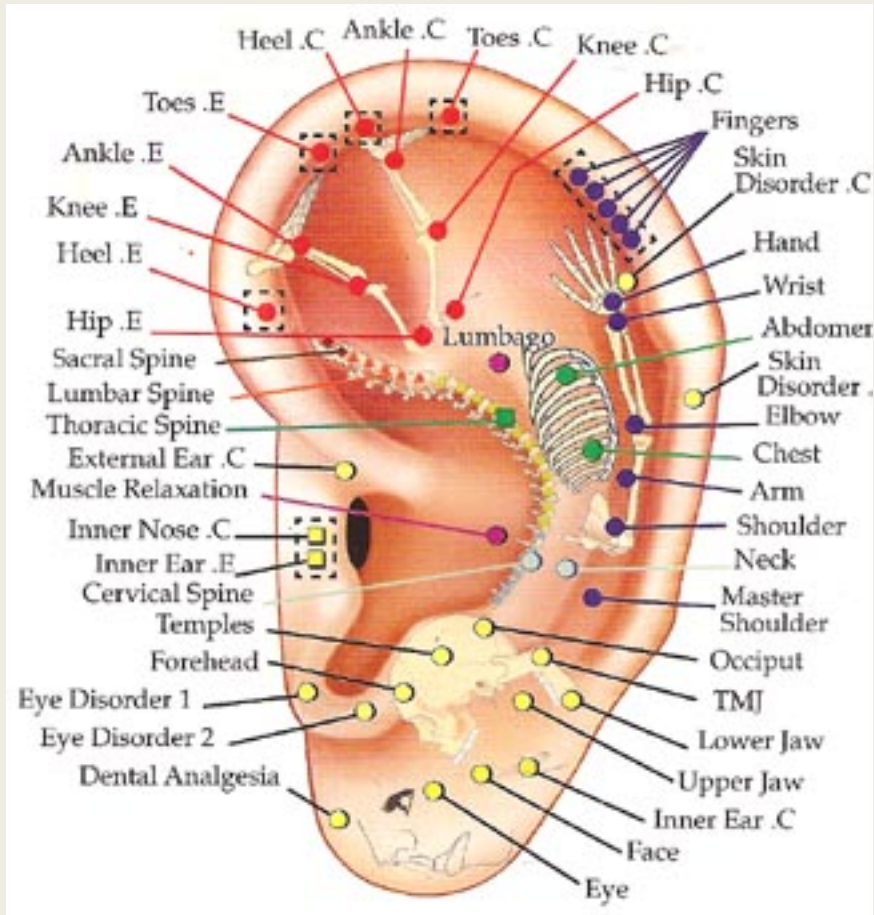


ACUPUNCTURE

Most Common Indications:

- Chronic Pain (spine, joints, fibromyalgia, HA, etc.)
- PTSD / Anxiety
- Nausea and vomiting (Oncology)
- Paralysis of CVAs
- Acute pain in the ED/FT (strains and sprains, sciatica,
- Migraine and
- Managing withdrawal symptoms

AURICULAR ACUPUNCTURE

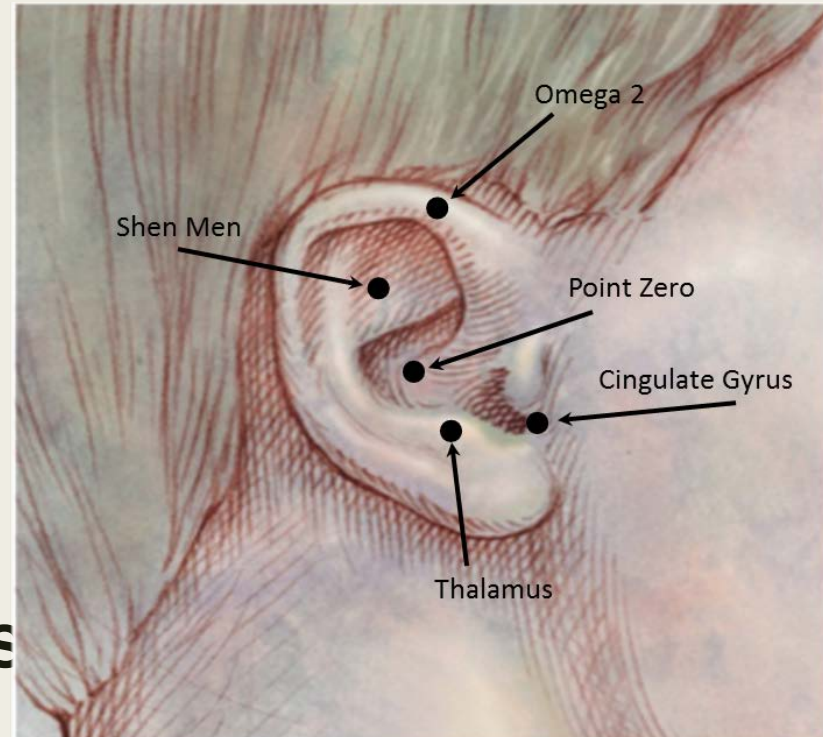


AURICULAR ACUPUNCTURE

- Battlefield Acupuncture (BFA)
- National Acupuncture Detoxification Agency (NADA)
- Other treatment protocols (Anxiety, Depression, PTSD etc.)

BATTLEFIELD ACUPUNCTURE

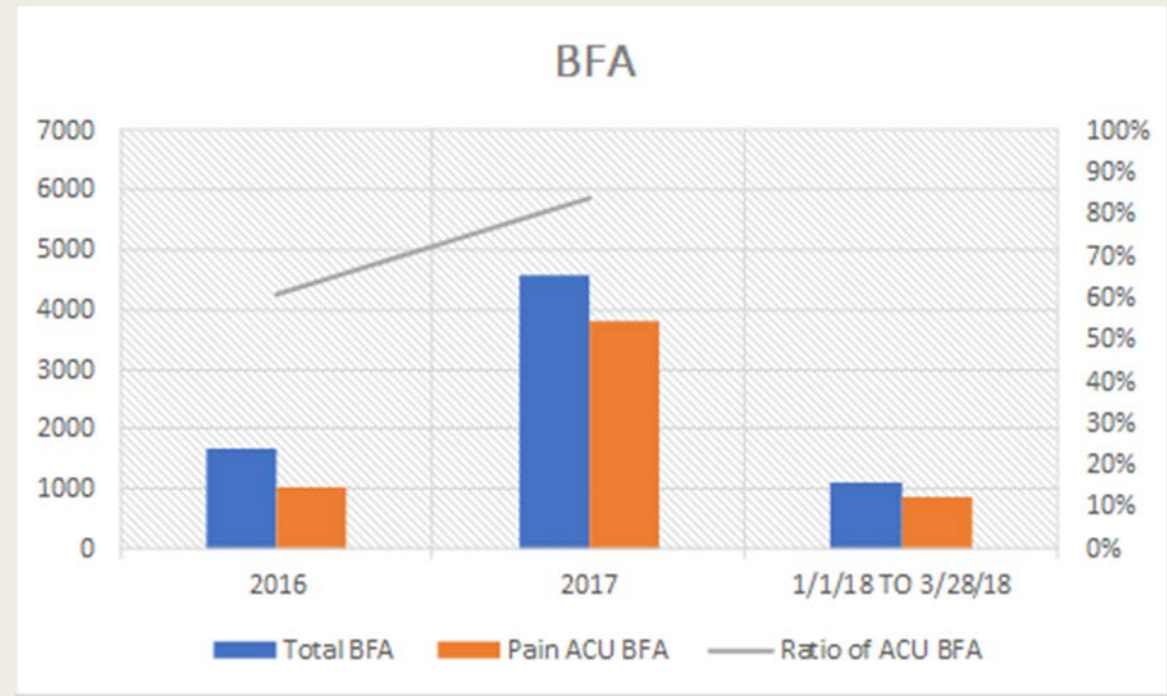
- ❑ Limited auricular AP protocol
- ❑ 5 semi permanent needles
- ❑ Quick, safe and effective
- ❑ 85% pain control
- ❑ Inexpensive
 - ❑ (\$2-5 in supplies / 2 minutes)
- ❑ 4 hours training for HC providers



BATTLEFIELD ACUPUNCTURE

JDD VA MC

- Over 150 providers are trained
- Two, daily walk-in clinics
- Volunteers providers
- 20 -30 walk-in visits a day
- BFA in all areas
 - ED/FT, CLC,PC, Specialty clinics (Ortho and RO), MH, Pain Clinics
- Train family members



- Video

NADA PROTOCOL

JDD VA MC

- Several MH providers are trained *in NADA*
- In IOP Detox and rehab
- Helps reduce reliance on benzos
- 20 -30 minutes group visits
- NADA protocol is also used in ED for management of acute withdrawals.

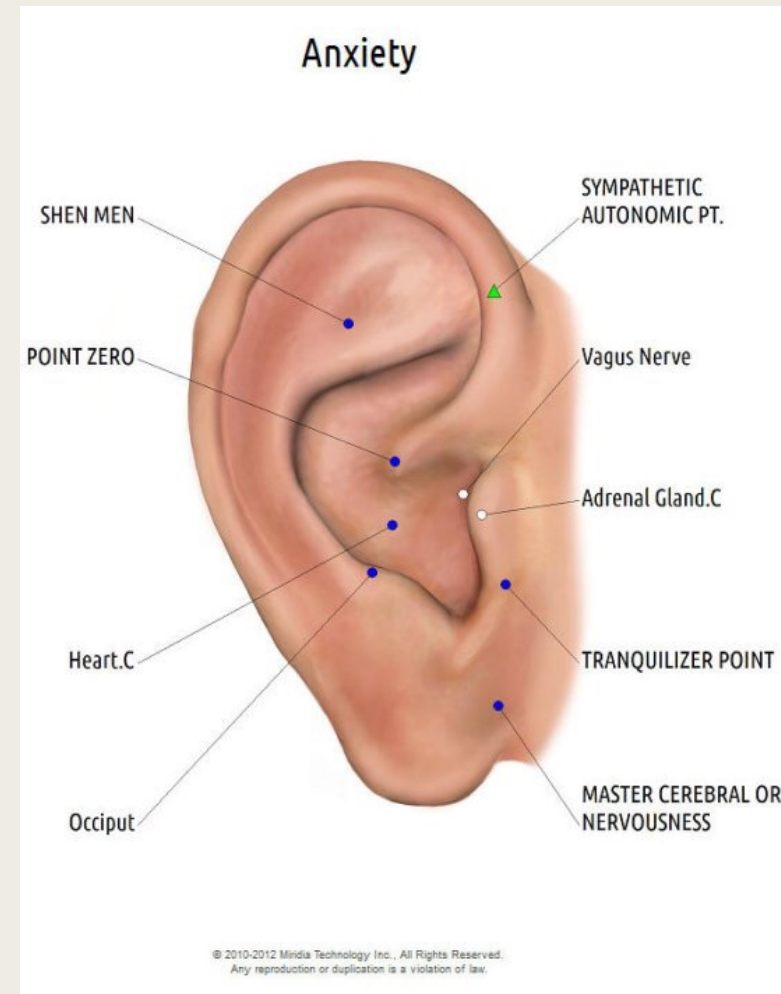


NADA PROTOCOL

- ❑ Certification in NADA takes a one day training
- ❑ MH providers, Psychologists, SW and any one dealing with SUD can be trained and certified
- ❑ Can be used in both inpatient and outpatient basis



OTHER EAR PROTOCOLS



ACUPUNCTURE & BFA IN OR

3 anesthesiologists and 3 CRNs

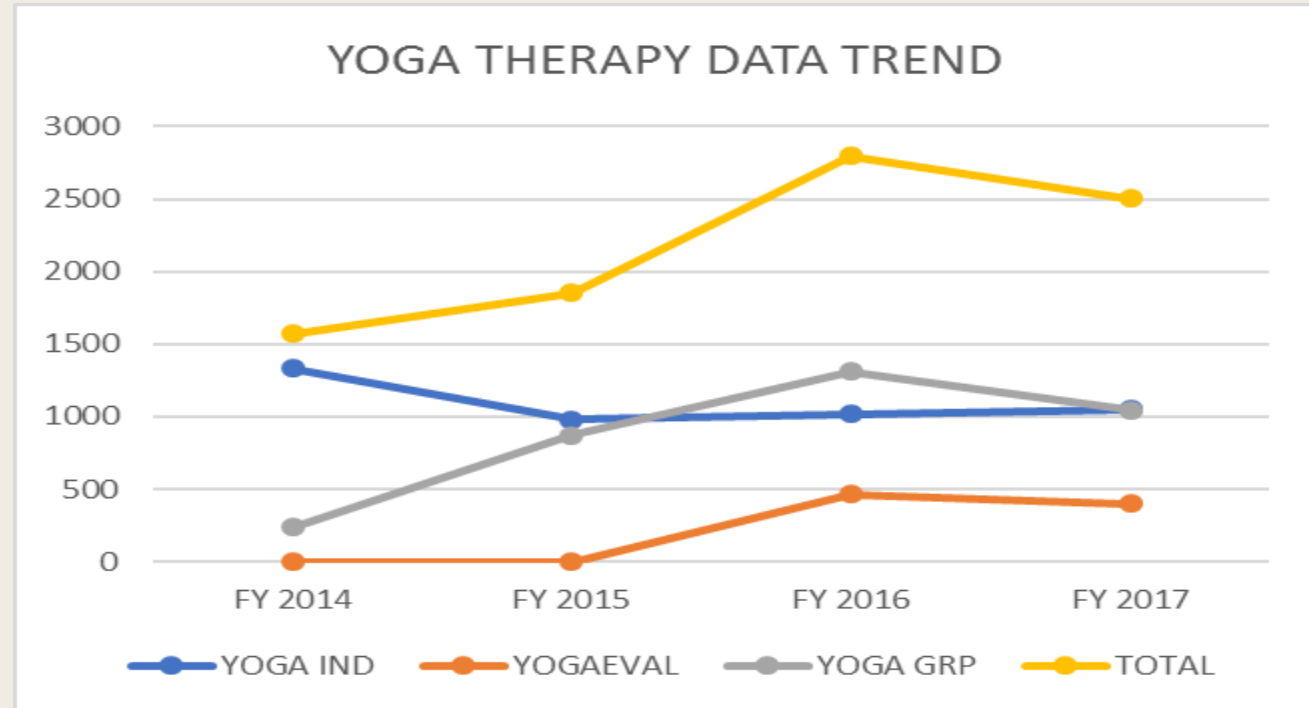
BFA used for Pre and Post Op pain

Research :

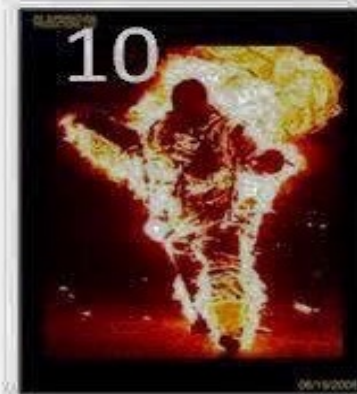
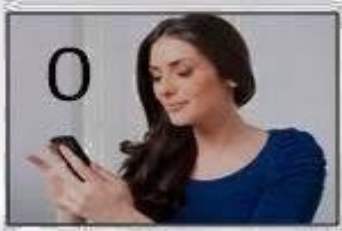
Somatic Acupuncture and BFA in
THA and TKA peri-op management
to reduce opioids used

YOGA

	FY 2014	FY 2015	FY 2016	FY 2017
YOGA IND	1332	981	1019	1052
YOGAEVAL	0	0	463	402
YOGA GRP	237	873	1312	1047
TOTAL	1569	1854	2794	2501

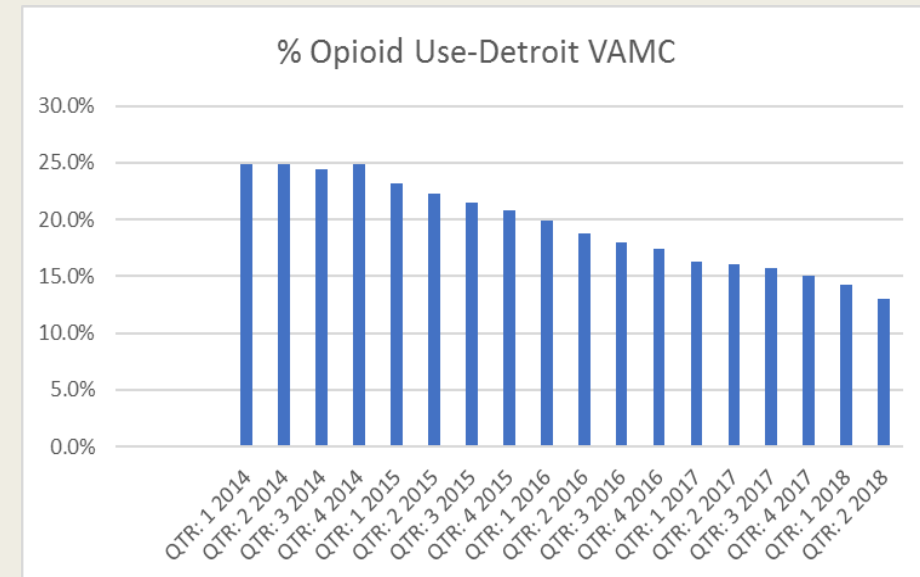


REALISTIC PAIN SCORE

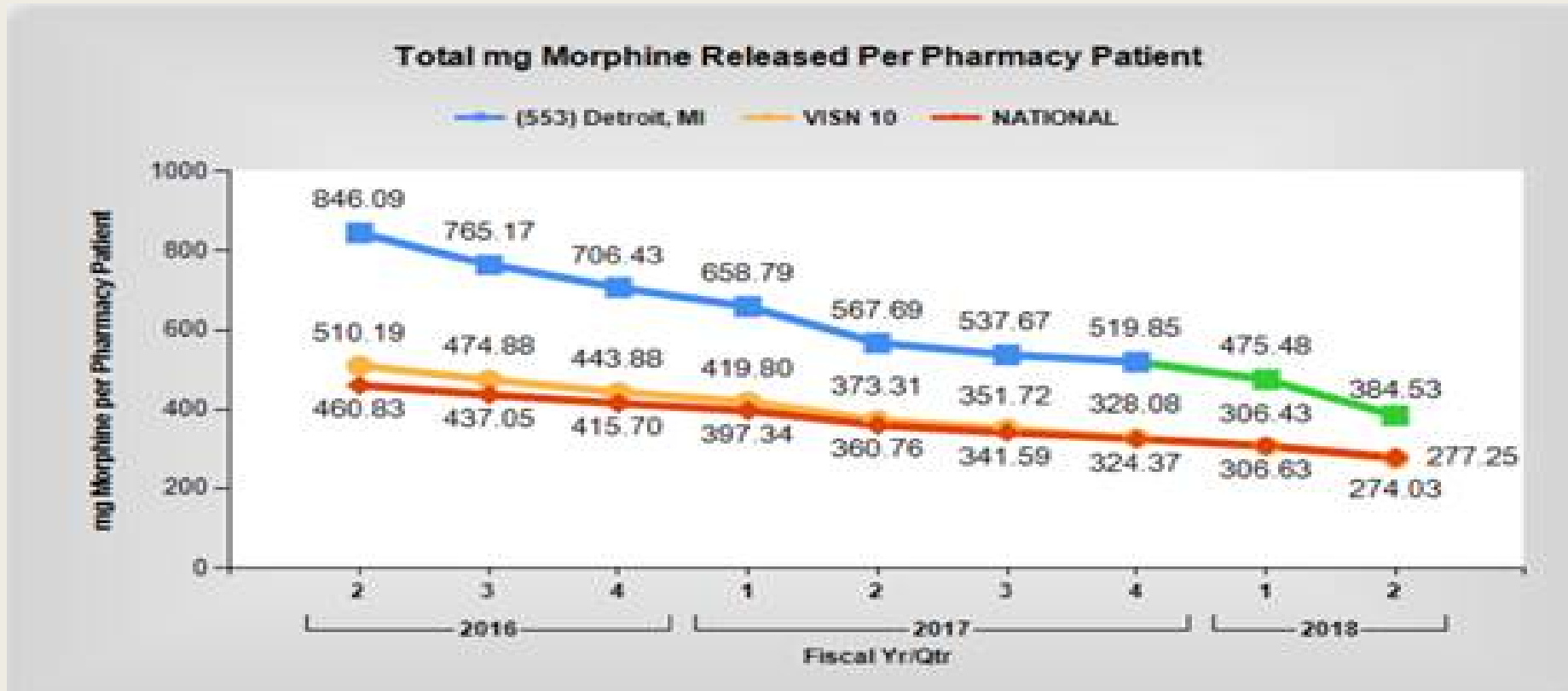


RESULTS

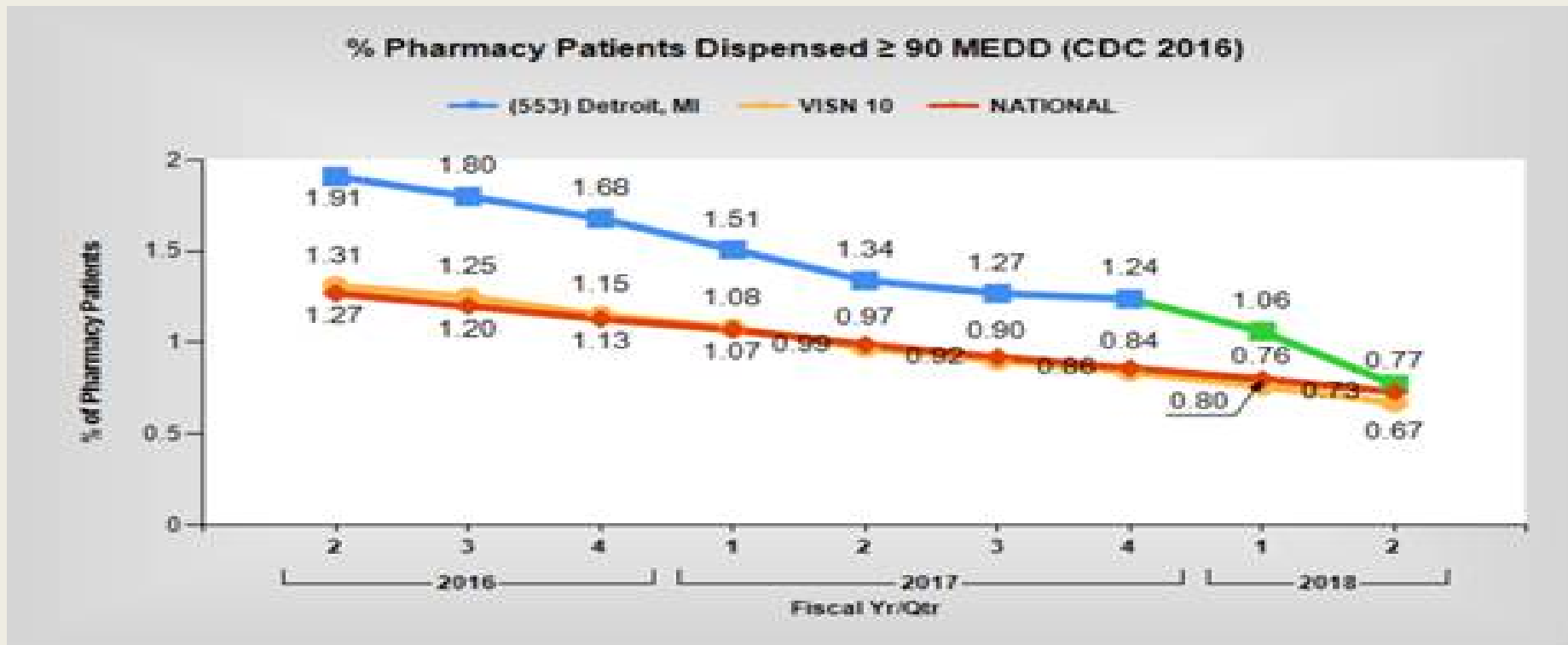
Opioid Utilization VISN Level Report-Detroit VA Medical Center				
Year Qtr	Patients on Opioids (C1-5)	VA Patient Population	Percentage:	National
QTR: 1 2014	6,874.00	27,691.00	24.82%	16.2
QTR: 2 2014	6,818.00	27,449.00	24.84%	15.7
QTR: 3 2014	6,771.00	27,763.00	24.39%	15.6
QTR: 4 2014	6,935.00	27,914.00	24.84%	15.5
QTR: 1 2015	6,371.00	27,519.00	23.15%	14.6
QTR: 2 2015	6,069.00	27,197.00	22.31%	14.1
QTR: 3 2015	5,832.00	27,160.00	21.47%	13.9
QTR: 4 2015	5,699.00	27,318.00	20.86%	13.6
QTR: 1 2016	5,421.00	27,184.00	19.94%	13.2
QTR: 2 2016	5,073.00	27,032.00	18.77%	12.9
QTR: 3 2016	4,850.00	26,899.00	18.03%	12.4
QTR: 4 2016	4,656.00	26,781.00	17.39%	12
QTR: 1 2017	4,515.00	27,636.00	16.34%	11.6
QTR: 2 2017	4,304.00	26,732.00	16.10%	11.1
QTR: 3 2017	4,166.00	26,585.00	15.67%	10.6
QTR: 4 2017	3,960.00	26,404.00	15.00%	10.2
QTR: 1 2018	3,737.00	26,316.00	14.20%	9.6
QTR: 2 2018	3,437.00	26,372.00	13.03%	9.2



TOTAL MEDDD RELEASED



> 90 MEDD

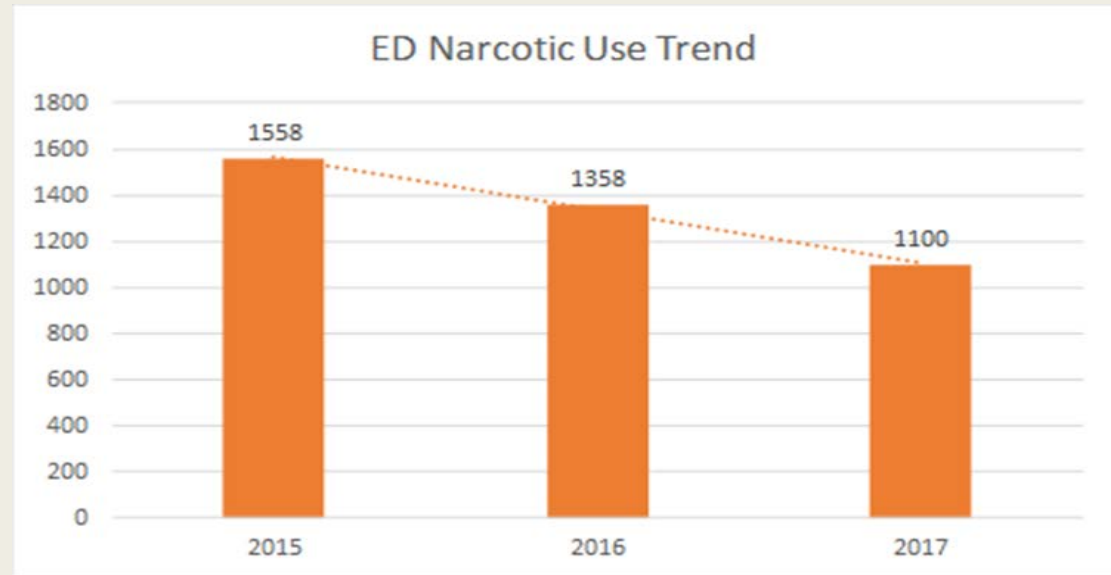


OPIOIDS IN ED

All ED staff are trained in BFA
(3 in somatic acupuncture, as well)

Used for

- Migraines
- Back pain
- Joint pains
- Chronic pancreatitis pain
- Others

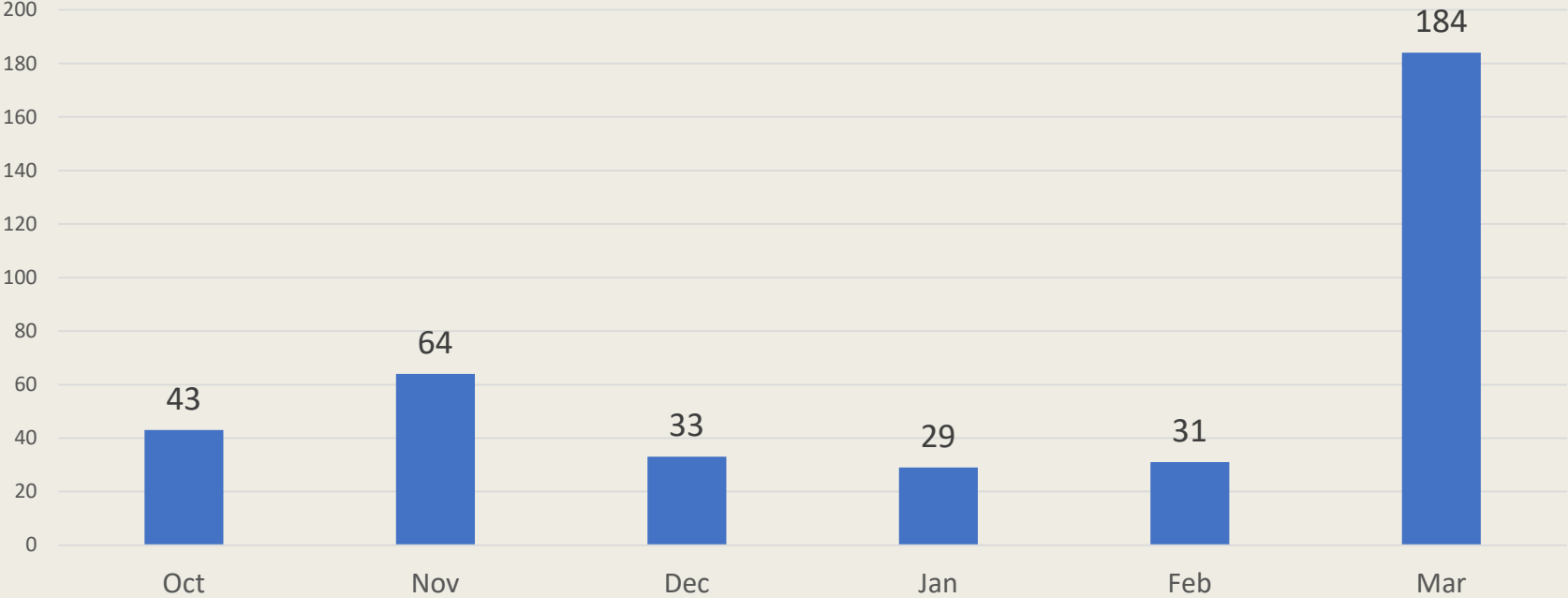


NALOXONE

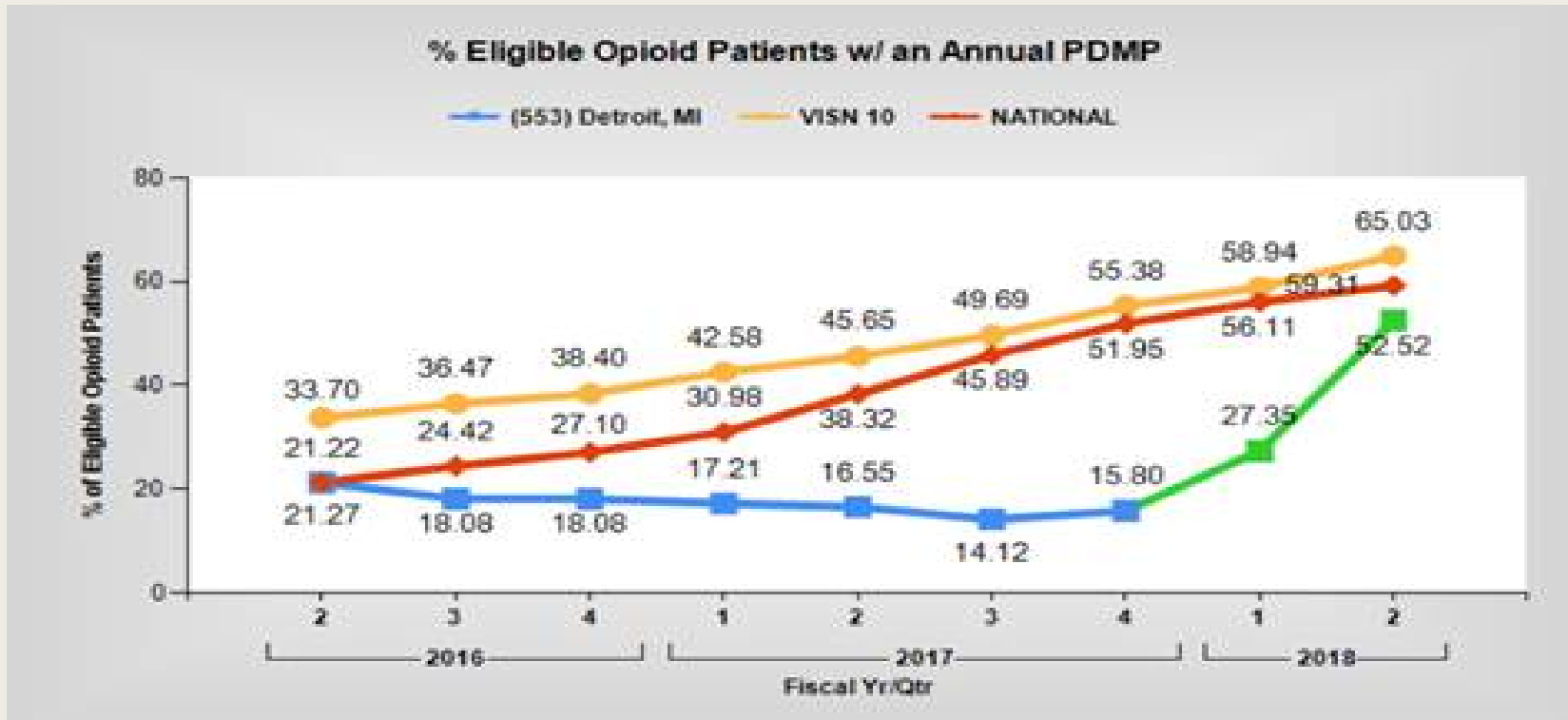
- Automatic dispensing by pharmacy
- >50mg MEDD
- Other known risks

NALOXONE

FY2018 Detroit Naloxone Distribution



PDMP



ACUPUNCTURE

- **COST PER SOMATIC AP VISIT** (30-60 Minutes using 2 or more rooms)
 - *\$45-100*
- **COST PER AURICULAR AP VISIT**
 - *5-15 Minutes (Group settings)*
 - *~\$50*

