

Address Barriers to Treating Opioid Use Disorder During COVID-19

You play a key role in **helping patients with opioid use disorder during COVID-19**...to address barriers to care, isolation, and stress.

About 1 in 3 patients with opioid use disorder (OUD) report changes or disruptions in care...such as trouble getting meds to treat OUD.

Make every effort to ensure patients have access.

Continue to expect many patients to use a buprenorphine/naloxone combo for OUD...at a usual buprenorphine dose of 16 to 24 mg/day for generic sublingual tabs or films. All forms are similarly effective.

Be aware that telephone evaluations are now temporarily allowed to start or continue buprenorphine for OUD...depending on state law.

If needed, help patients find a certified prescriber with the online "Buprenorphine Practitioner Locator" or by calling 800-662-HELP (4357).

More payers are also covering meds for OUD without a prior auth.

Work as a team to maintain adequate inventory. Patients who can't get these Rx's are at risk for withdrawal, relapse, and overdose.

If patients are reluctant to come in to the pharmacy, consider options such as drive-thru, "curbside" pickup, or delivery if possible.

Ask how patients are coping...and assess triggers for relapse.

For instance, suggest exercise to help with stress...listing daily accomplishments to build a sense of progress...or trying an app to support mental health (*MindShift CBT, Moodpath, etc.*).

Encourage staying connected. For example, suggest virtual support groups if needed...such as [InTheRooms.com](https://www.intherooms.com) or [SmartRecovery.org](https://www.smartrecovery.org).

Ensure comorbidities, such as anxiety or depression, are treated.

Emphasize having naloxone on hand. In fact, labeling for opioids or meds to treat OUD will now recommend discussing naloxone with patients.

Dispel myths and work to reduce stigma. Explain that OUD is a chronic condition...similar to diabetes, hypertension, etc. Expect to see long-term treatment to reduce the risk of relapse.

Clarify that use of meds for OUD is NOT "trading one addiction for another"...it's a tool to help patients improve daily function.

Access our chart, *Management of Opioid Use Disorder*, for a comparison of buprenorphine products, screening tools, and more.

Key References:

-J Addict Med 2020;14(2S Suppl 1):1-91

-<https://store.samhsa.gov/product/TIP-63-Medications-for-Opioid-Use-Disorder-Full-Document/PEP20-02-01-006> (9-21-20)

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-N Engl J Med 2020;383(8):701-3

-Ann Intern Med 2020;173(1):59-60

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