

for HIV prevention.

- Evaluate whether **pre-exposure prophylaxis (PrEP)** is indicated
- **Recommend fentanyl test strips**, if available.
- For those who inject, **discuss sterile injection practices** to reduce risk of infections; link with a syringe exchange program or prescribe insulin needles.
- For patients who use opioids alone, recommend www.neverusealone.com or the 1-800-484-3731 hotline to prevent unintentional overdose.

Other harm reduction strategies:

Screen for infections (especially HIV, hepatitis C)



Recommend or provide immunizations (hepatitis, pneumococcus, tetanus)



Prescribe intranasal naloxone (e.g., Narcan) to prevent overdose



Discuss harm reduction strategies with all patients who have OUD

Opioid dependence is not the same as opioid addiction¹

Tolerance

- need for **increased dose** of a drug to achieve the same effect
- can occur even when taken as prescribed

Dependence

- **physiologic adaptations** to the chronic presence of a drug to maintain normal function
- sudden absence of drug can lead to withdrawal

Opioid use disorder/ addiction

- uncontrollable drug use **despite harmful consequences**



A patient who becomes physically dependent on opioids prescribed for chronic pain or for the treatment of OUD, and takes them as prescribed with no impairment of daily life, is not considered to have an addiction.

Visit AlosaHealth.org/OUD for more information and resources.

Does the patient have opioid use disorder (OUD)?

OUD is problematic opioid use that leads to significant impairment or distress marked by at least two of the following over the past 12 months:²

- using opioids at higher doses or longer than intended
- unsuccessful attempts to control or reduce use
- significant time spent obtaining, consuming, or recovering from opioids
- cravings for opioids
- failure to fulfill obligations because of opioid use
- persistent social or interpersonal problems caused by opioids
- opioid use displaces social, work, or recreational activities
- using opioids in hazardous situations (e.g., while driving)
- use continues despite physical or psychological problems caused or worsened by opioids
- tolerance: a reduced effect of the drug despite increasing dosages (in patients taking opioids other than as prescribed)
- withdrawal (in patients taking opioids other than as prescribed)

Mild: 2-3 criteria; Moderate: 4-5 criteria; Severe: 6 or more criteria

(1) Szalavitz M, Rigg KK, Wakeman SE. Drug dependence is not addiction-and it matters. *Ann Med.* 2021; 53(1):1989-1992. (2) American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders, 5th Ed., Text Revision.* Arlington, VA: American Psychiatric Publishing; 2022.



Balanced information for better care

These are general recommendations only; specific clinical decisions should be made by the treating clinician based on an individual patient's clinical condition.

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