

Relieving Pain Means Gain

Opioid shortage leads to some modified pain protocols at OSF HealthCare

It began nearly a year ago.

Manufacturer slowdowns led to an injectable opioid shortage at hospitals across the nation. That meant pain relievers like hydromorphone (dilaudid), morphine and fentanyl - used primarily in surgery or the emergency department to treat acute pain - were becoming increasingly less available and difficult to acquire.

OSF HealthCare immediately took action to determine strategies to mitigate the shortages while still meeting surgical needs and those of our patients.

Kyle Shick, Pharmacy Director for OSF HealthCare Northern Region, says being part of a large medical system helped.

"And some of the even smaller hospitals, they're able to still get like an allocation of supply that they may not use" says Kyle Shick, Pharmacy Director for OSF HealthCare Northern Region. "So, everybody bought what they could at all times and, so with that, we were able to. If certain hospitals used more, of a certain hydromorphone or morphine, we were able to shift supply back and forth to each other to be able to meet the needs of all the hospitals."

Shick says, say they were buying 500mg hydromorphone vials to compound 1 milligram syringes from that very concentrated initial product, utilizing the skills of the pharmacy technicians compounding skills to not run out of the drug. Doing that helped OSF HealthCare Saint Anthony stock up and also share vials with another OSF hospital.

Even during the worst of the shortage, OSF HealthCare never ran out. Patients were always cared for and no surgeries had to be cancelled.

The strategy included alerts to physicians to update them on the situation and advise them on pain treatment alternatives.

Shick sees that as a possible benefit for the hospitals and the patients.

"We are decreasing our use of injectables", says Shick. Which is a good thing to, with the opioid epidemic and all of the things that are going on. And that, currently, it does help reduce the total use of opioids. Because we're also using other drugs too. Like different non-steroidal injectables and even oral Tylenol. Different strategies to use those first before just going straight to the IV therapy."

Still, Shick admits that injectable opioids will continue to be needed for those with severe pain. And the shortage challenge is far from over. He says it's expected to last well into 2019.