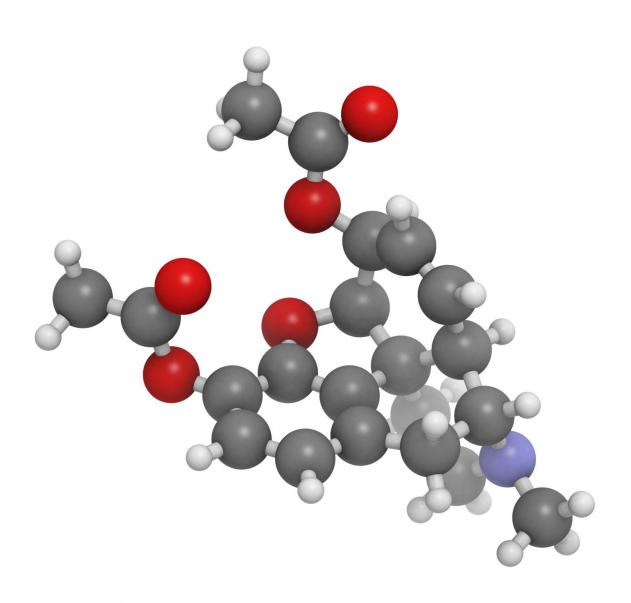


ICUs strained by increased volume and a near doubling of opioid-related deaths

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Heroin molecule. Credit: ATS

National trends in opioid related overdoses are being felt across every part of the medical system, including the country's intensive care units. ICU admissions related to opioid overdoses are steadily increasing, and opioid overdose-related ICU deaths have nearly doubled since 2009. New research from Boston's Beth Israel Deaconess Medical Center, University of Chicago, and Vizient, Inc., presented at the ATS 2016 International Conference shows the strain America's opioid crisis is putting on ICUs and the critical care teams who care for these patients and calls attention to efforts needed to meet the demands of this expanding population.

The research team analyzed patient data from Vizient, Inc. that included 28 million hospital discharges over a seven year period. The results showed a 42 percent increase in hospital discharges for opioid overdoses since 2009. This increase, along with the rise in opioid-related deaths, "affected different parts of the country in different ways," the authors wrote.

"Pennsylvania and North Carolina have nearly doubled the number of ICU discharges for opioid overdose in the past seven years," said lead investigator, Jennifer Stevens, MD, The Center for Healthcare Delivery Science at Beth Israel Deaconess Medical Center. "This suggests that there may be an opportunity for hospitals and communities in these states to get ahead of the <u>critical care</u> needs of this population and to help first-line responders prevent future admissions to the ICU."

Dr. Stevens, who is also a critical care physician, says the sobering numbers highlighted by this research study are a warning signal. Despite the availability of treatment facilities and the widespread use of a



medication called Naloxone that can reverse the effects of overdose, ICUs are seeing a rise in admissions of very sick overdose <u>patients</u>. For example, these patients are 30 percent more likely to need acute dialysis, and have contributed to an increased healthcare cost of 46 percent over the last 7 years.

"Hospitals that are seeing rising volumes of overdose and opioid-dependent admissions can help by increasing training for clinicians in addiction management, and by working to devise strategies that support patients and families in the hospital, and as they transition loved ones from the critical care environment to outpatient addiction treatment," said co-author Michael Howell, MD, MPH, Chief Quality Officer, University of Chicago Medicine. "Greater national funding to support community efforts that help survivors and improve resources for patients and families is essential for these efforts to move forward and succeed."

Provided by American Thoracic Society

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