

## Integration of opioid, infectious disease treatment needed

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(HealthDay)—Steps should be taken to integrate treatment at the



intersection of opioid use disorder (OUD) and related HIV and hepatitis C virus (HCV) infectious disease epidemics, according to an Ideas and Opinion piece published online July 13 in the *Annals of Internal Medicine*. The article was published to coincide with the National Academies of Sciences, Engineering, and Medicine (NASEM) expert panel's recommendations for treating opioid abuse and its related infectious epidemics.

Sandra A. Springer, M.D., of the Yale School of Medicine and Yale University School of Public Health in New Haven, Conn., and colleagues discuss five crucial steps for clinicians treating patients affected by opioid addiction and intersecting HIV and HCV infections. These recommendations resulted from the NASEM workshop "Integrating Infectious Disease Considerations with Response to the Opioid Epidemic" that took place in March.

The five action steps include: (1) implement screening for OUD in all relevant health care settings; (2) immediately prescribe effective medication for OUD and/or opioid withdrawal symptoms for patients with positive screening results; (3) develop hospital-based protocols that facilitate OUD treatment initiation and linkage to community-based treatment upon discharge; (4) increase training in hospitals, medical schools, physician assistant schools, nursing schools, and residency programs to identify and treat OUD; and (5) increase access to addiction care and funding to states to provide effective medications to treat OUD.

"All health care providers have a role in combating the OUD epidemic and its infectious disease consequences. Those who treat infectious complications of OUD are well-suited to screen for OUD and begin treatment with effective U.S. Food and Drug Administration-approved medications," the authors write. "Integrating our collective skills may make the difference between life and death for patients with OUD."



## **More information:** Abstract/Full Text

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