



## Impact of long-acting naltrexone injections provided by a rural healthcare system: a retrospective review

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### BACKGROUND

- Between 1999 and 2019, nearly 500,000 people died from an overdose involving an opioid<sup>1</sup>
- The opioid epidemic remains present in the United States, particularly in Appalachian regions
- In 2017, Appalachian counties throughout the country had an opioid overdose rate 72 percent higher than non-Appalachian counties<sup>2</sup>
- Monthly intramuscular naltrexone injections are a key component in the medical management of opioid use disorder (OUD)
- Long-acting naltrexone injections assist in prevention of relapse to opioid dependence following opioid detoxification
- Naltrexone binds to mu opioid receptors with high affinity
- Occupation of the mu opioid receptor prevents binding of exogenous opioids, allowing for marked inhibition of the subjective effects of exogenous opioids<sup>3</sup>
- Provider scarcity in rural areas can lead to increased appointment burden and result in loss to follow up, increasing the risk of opioid relapse and overdose

### OBJECTIVES

This retrospective study aims to illuminate the impact of long-acting naltrexone injections administered by a rural healthcare system.

#### Primary Objective:

- To evaluate adherence to monthly naltrexone injection schedule

#### Secondary Objectives:

- To evaluate the following: rate of opioid relapse via urine drug screen results, rate of opioid overdose, and rate of adverse drug reaction (ADR)

### METHODS

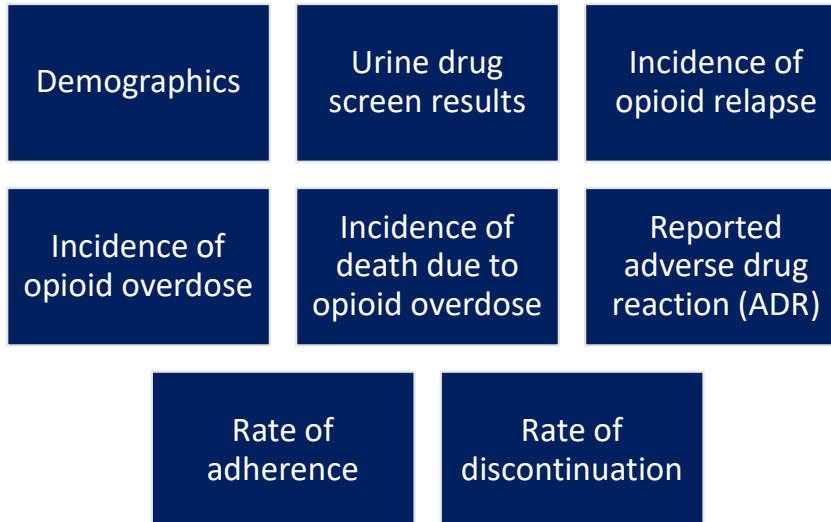
**Design:** Single center, retrospective study on the impact of long-acting naltrexone injections administered by a rural healthcare system with regards to monthly adherence, the rate of opioid relapse as evidenced by urine drug screen results, and the rate of opioid overdose

**Performance Site:** St. Claire HealthCare; Morehead, KY

**Inclusion Criteria:** All patients receiving naltrexone injections for OUD at St. Claire HealthCare from January 1, 2019 to December 31, 2020 were included for analysis

**Exclusion Criteria:** Patients who receive naltrexone injections for any indication except OUD were excluded from analysis

#### Data Collection Points:



### RESULTS

- Total of 19 long-acting naltrexone injections administered during the study period
- Insurance denied coverage for five patients who were prescribed long-acting naltrexone injections
- Patients who did not receive long-acting naltrexone injections due to insurance limitation were subsequently prescribed buprenorphine/naloxone therapy and all experienced relapse within the study period
- All patients were lost to follow up for management of opioid use disorder

### CONCLUSIONS AND FUTURE DIRECTIONS

- There are areas of opportunity within the St. Claire Healthcare system to optimize the medical management of OUD with long-acting naltrexone injections
- Utilize pre-existing pharmacist-driven ambulatory care services and Kentucky Board Authorized Protocols to increase access to treatment for OUD and improve patient adherence to long-acting naltrexone injections

### DISCLOSURES & ACKNOWLEDGEMENTS

The authors of this presentation have the following to disclose concerning possible financial or personal relationships with commercial entities that may have direct or indirect interest in the subject matter of this presentation.

Kacee Hardeman, PharmD: Nothing to disclose  
Brentney Fields, PharmD: Nothing to disclose  
Tara Mains, PharmD, BCPS: Nothing to disclose

### REFERENCES

1. Centers for Disease Control and Prevention. *Understanding the Epidemic: CDC's Response to the Opioid Overdose Epidemic.*
2. U.S. Department of Health and Human Services. *Opioids in Medicaid: Concerns About Opioid Use Among Beneficiaries in Six Appalachian Counties.*
3. *Understanding Vivitrol Treatment.* (2021).