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Pharmacy Students’ Perception and Attitudes Towards Opioid Overdose and Naloxone Rescue Therapy

Jeesoon Kim, BS, PharmD; Joseph Indelicato, Ph.D; Roopali Sharma, BS, PharmD, AAHIVP, BCPS (AQ-ID)

Touro College of Pharmacy, New York, NY  
Touro College School of Health Sciences, New York, NY

BACKGROUND AND OBJECTIVE

Background:

- In 2015, accidental death due to drug overdose was the leading cause of death in the United States.

- Of the lethal dose cases, prescription pain reliever (opioids) overdose cases were the most prevalent with 42,444 reported cases.

- Naloxone is a competitive µ-opioid receptor antagonist and reverses respiratory depression caused by opioid overdose. Due to this property, it is the primary opioid reversal agent used in overdose cases, whether intentional or accidental.

- On December 7, 2015, the New York City Department of Health and Mental Hygiene licensed approved commercial entities to dispense naloxone without a prescription (“standing order”).

- With the new regulation, it is essential that pharmacists are able to identify high risk patients, recommend naloxone to these patients, and educate and counsel patients, caregivers, and other healthcare professionals regarding opioid overdose and naloxone therapy.

- Touro College of Pharmacy New York mandated Doctor of Pharmacy Students, professional years 2, 3, and 4 (P2,3,4) to complete online training on naloxone therapy and opioid overdose in response to the new regulation.

Objectives:

- To investigate pharmacy students’ perception and attitudes towards opioid overdose and dispensing naloxone rescue therapy without a prescription.

STUDY DESIGN

Study Design and Statistics:

- Pre- and post survey study

- Paired t-test was used to compare pre and post survey data and chi-squared tests were used to compare subgroups

Inclusion criteria:

- Students at Touro College of Pharmacy (TCOP) currently enrolled in P2, P3 or P4 years, who were required to complete mandatory online training provided by the Pharmacists' Letter® (“Naloxone Rescue Therapy for Opioid Overdose”).

- Professional year 1 (P1) students were excluded because they were not required to complete the mandatory online training.

Procedure:

- Pre-training survey
- Mandatory online training on naloxone rescue therapy
- Post-training survey
- Data analysis

STUDY RESULTS

Perception towards prescription opioids and risk of abuse

Perception towards naloxone therapy as a standing order and opioid abuse

The Availability of Naloxone Rescue Therapy as a Standing Order Will Promote Opioid Abuse

DISCUSSION AND CONCLUSION

In general, more P4 students felt “confident” in several areas compared to P3 and P2 students.

Additional training improved students’ confidence in identifying high risk patients, and current work experiences may impact students’ confidence in dispensing naloxone rescue therapy kit.

Most students demonstrated appropriate attitude and perception towards opioid overdose and naloxone use pre-training, which may explain why there were no significant changes in their attitudes towards naloxone rescue therapy kit post-training compared to pre-training.

No additional trainings on this topic was provided in the curriculum at the time of project besides the lectures they had received in the therapeutic courses.

It is unclear if students’ confidence correlate with their practical skills.

Assessment of practical skills during simulation labs or Objective Structured Clinical Examinations (OSCEs) may be helpful in assessing students’ confidence and ability to apply the skills in real-life settings.

About 20% of students believed ready access to naloxone therapy would promote overdose post-training.

Students who worked in community pharmacy settings were significantly more confident with dispensing naloxone rescue therapy without prescription post-training (p=0.017; 2-sided chi-squared test).

Significantly more male students answered that they feel they’ve received adequate education on opioid overdose, assessing the risk, and treatment of overdose in the curriculum (p=0.005; 2-sided chi-squared test).

REFERENCES


- Background:
- Pre-training survey vs. Post-training survey
- Data analysis

- Attitudes towards naloxone rescue therapy kit (Post-Training) – Cont’d

- Data analysis

- Pre-training survey vs. Post-survey: p=0.055

- Pre-training survey vs. Post-survey: p=0.458

- Pre-training survey vs. Post-survey: p=0.363

DISCLOSURE

Authors of this presentation have nothing to disclose concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation.

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