

# Alcohol & Other Drugs Newsletter

## **HOT TOPIC** **HARM REDUCTION THIS HOLIDAY**

By Dr Esther Han

With the Christmas and New Year holidays just around the corner this is an opportune time to be advising our patients on harm reduction. Most people have to attend numerous holiday functions where the alcohol is free flowing, food is plentiful and diets are put on hold until after the New Year. Even this short disruption to normal lifestyle patterns can significantly affect weight and along with that body mass index, glycated haemoglobin, total cholesterol, LDL, insulin and triglycerides.

Statistically we know that there is a higher road fatality rate at this time also. One of the top causes of fatal car accidents is alcohol and this was responsible for 19% of fatalities in 2016. So a few practical tips that we can advise our patients on to help them come through this holiday period safely:

- 1 - Have a plan for getting home safely if drinking - uber, taxi, public transport, arrange to be picked up
- 2 - Plan your drinking time - try to start later and go home earlier
- 3 - Eat before or when drinking alcohol as it helps to slow down the rate of absorption
- 4 - Avoid salty snacks, no matter how tempting
- 5 - If thirsty, quench thirst with a non-alcoholic drink
- 6 - Alternate alcoholic drinks with non-alcoholic drinks

### POP QUIZ

How many standard drinks in...

- 1 - A glass of sherry (60mls)?
- 2 - A glass of eggnog?
- 3 - A stubbie of full strength beer (375mls)?
- 4 - A glass of white wine (100mls)?





## Opioid dependence in primary care

By Dr Nicole Gouda

Warning: the following article contains multiple acronyms that may be confounding for some audiences.

Only those living under a rock would have failed to notice the countless media reports on the emerging 'opioid crisis'. Since the early 1990s, there has been a 15 times increase in PBS opioid prescribing in Australia. Pharmaceutical opioid deaths now surpass those due to heroin, and 70% of all fatal opioid overdoses in Australia are now from prescription opioids. This has culminated in a review of guidelines surrounding pain management prescribing (including codeine, tramadol, oxycodone, fentanyl and morphine) and the nationwide removal of over the counter (OTC) codeine since early 2018.

Approximately one in 20 people prescribed opioids for pain will become dependent at some point in their lives. While those of us in primary care have been encouraged to change our prescribing habits for patients with acute and chronic pain, there has been too little solution-based information about how to manage those who show signs of prescription opioid dependence.

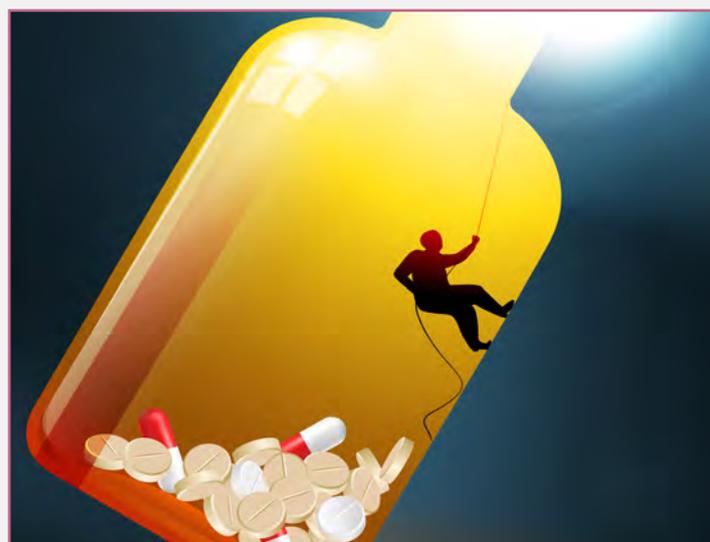
Enter opioid agonist therapy (OAT). Opioid agonists such as methadone and more recently buprenorphine have been used historically to treat illicit opioid dependence in Australia since the 1970s. However, OAT can also be used to manage prescription opioid dependence (including medications such as codeine and oxycodone), not infrequently seen in general practice.

The reality is that there is an acute shortage of doctors in Australia who can, or are willing to, prescribe OAT, whether it be for the treatment of illicit or prescribed opioid dependence. While this has previously been a specialist area requiring accreditation, unaccredited GPs are now able to apply to the Pharmaceutical Regulatory Unit (PRU) for an authority to prescribe methadone for up to ten low-risk stable patients who

have been transferred from an accredited prescriber, and initiate up to 20 buprenorphine-naloxone patients. A short, online, 'fundamentals' course, that covers the 'basics' about the NSW opioid treatment program (OTP) and provides information around the safe prescribing of pharmacotherapies, is available for all interested general practitioners.

For those who may not be confident prescribing OAT without further training, or wish to become an accredited prescriber, the opioid treatment accreditation course (OTAC) through the NSW Ministry of Health, offers a full day program at the University of Sydney. This enjoyable and informative course focuses on clinical management and covers all aspects of the NSW OTP (details below). To further support primary care in this area, the SNPHN is offering paid clinical attachments through the LHD run OTP clinics.

>> For further information, see links below or contact the SNPHN [here](#).



### Useful Links

Screening tool— codeine dependence >> [Click here](#)

NSW Clinical Guidelines; Treatment of Opioid Dependence 2018 Abbreviated >> [Click here](#)

OTAC (including fundamentals training) > [Click here](#)

PRU - Pharmaceutical Regulatory Unit >> [Click here](#)

### Acronym index

OTC - Over the counter  
OAT - Opioid agonist therapy  
OTP - Opioid treatment program  
OTAC - Opioid treatment accreditation course



# PRIMARY HEALTH NETWORK (PHN) / LOCAL HEALTH DISTRICT (LHD) UPDATE

## Collaborative Projects

This year has seen the launch of several collaborative projects with the Primary Health Network and Drug and Alcohol Services at Northern Sydney Local Health District. Following extensive consultation and planning, we are thrilled to announce the launch of our Alcohol and Other Drugs (AOD) Shared Care GP Program. Expressions of interest have been issued offering clinical attachments to GPs who are interested in increasing their knowledge of addiction medicine and developing their partnership with Drug and Alcohol Services provided by the Local Health District to manage more alcohol and other drug patients. Participating GPs have access to mentoring and a private clinician only peer support group for case management.

Together we also provided a series of education events covering Alcohol, Cannabis, and Opioids misuse. Next year will feature events about recreational drug misuse management and more.

Next year we will pilot nurse led alcohol and other drug clinics in primary care. An experienced drug and alcohol nurse will operate from two general practices twice per week and support primary care staff by providing assessments, care planning, medication advice, education and more. Keep your eyes open for updates on the progress of these clinics.



## Alcohol Screening & Brief Intervention Pilot

We are currently piloting an Alcohol Screening and Brief Intervention Project with a group of GPs in Northern Sydney. GPs screen patients using the AUDIT-C alcohol screen and provide verbal advice and information leaflets to eligible patients. We are aiming to measure whether these interventions can be incorporated into busy general practice work flows, and whether they will lead to a reduction in alcohol consumption amongst patients. Initial findings are promising, a full analysis and report will be written in early 2019.

## Check out our AOD webpage!

The Sydney North Primary Health Network *Alcohol and Other Drugs Needs Assessment Report (2016)* identified that our region has one of the lowest rates in NSW of self-reported alcohol consumption at levels likely to pose lifetime risk, while recording the highest rate of alcohol attributable hospitalisations in NSW.

The PHN is committed to support GPs and other primary-care workers in providing care to patients with drug and alcohol issues.

With this in mind, we have created a webpage with links to guidelines, local services, patient information leaflets and primary care support. As the field is rapidly changing, we are frequently updating our resources. >> [Access here.](#)



## Alcohol and other drugs - webinars

We have launched a series of 8 Alcohol and other Drugs Webinars. The first of the series, Substance use in our community: identifying commonly used substances and their effects was screened on the 4th of December. February's webinar features managing AOD and physical health in general practice. All information will be shared via the PHN's events emails, and on the [PHN education website pages](#).

For further information about Alcohol and other drugs, or suggestions or anything else contact Debra Clark and Nicole Gouda >> [dclark@snhn.org.au](mailto:dclark@snhn.org.au)





## ALCOHOL & OTHER DRUGS LOCAL SERVICES

The SNPHN Mental Health Triage provides access to a range of mental health, suicide prevention and alcohol and other drug service. You can see all the services [here](#). Northern Sydney Local Health District provides a range of [drugs & alcohol services](#).

The Alcohol and other drug services commissioned by SNPHN include:



### ACON

Provide a Remote access program (Skype or telephone) providing intensive, structured interventions to Lesbian, Gay, Bisexual, Transgender and Intersex (lesbian, gay, bisexual, trans, and/or intersex) people with alcohol and other drug misuse issues.

>> Phone: 1800 063 060



### Odyssey House

Provide non-residential day rehabilitation program for adults with alcohol and other drug misuse issues, as well as culturally appropriate services for Aboriginal and Torres Strait Islander people with drug and alcohol misuse issues.

>> Phone 1800 397 739



### SDECC

Provide an Intensive non-residential support program for young people aged 14- 25 years with moderate to severe drug and alcohol addiction. Individual counselling, care coordination, group programs and intensive outreach.

>> Phone 02 9977 0711

### Do you know?

....about a service called DASAS (Drug and Alcohol Specialist Advisory Service), that provides phone advice to healthcare professionals on drug effects , withdrawal symptoms, referral options, therapeutics and general management of patients with drug and alcohol issues. It is a 24-hour service manned by trained medical specialists. A great number to have in your address book for an emergency.

>> T: 93618006 | 1800 023 687

For information about other local alcohol and other drug services in Northern Sydney please [click here](#).



## GUIDELINES UPDATES

In July 2018, NSW Health released updated [Clinical Guidelines for the treatment of opioid dependence](#). The new guidelines align with national directions and recommendations and incorporate the latest clinical evidence.

The guidelines aim to improve access to opioid treatment by:

- supporting the expansion of the NSW Opioid Treatment Program (OTP) into the primary care sector and;
- increasing involvement of general practitioners (GPs), non-government organisations (NGOs) and community pharmacies.

The guidelines seek to ensure patients receive more personalised care by introducing a system that differentiates between those who have low/moderate treatment needs and can be treated in community settings and those with more complex presentations and higher treatment needs and should be referred to and treated in the specialist treatment sector. The guidelines support more effective coordination of care across health services that will enable better outcomes for patients and more efficient use of sector resources.

In 2019, SNPHN will work to further support the capacity of primary care providers to initiate and monitor Opioid Antagonist Treatment (OAT) for patients with low to moderate treatment needs and strengthen referral pathways for those with high and complex needs. This work will be supported by collaboration with Northern Sydney LHD through the GP AOD Shared Care Initiative as well as targeted education events.



## UPCOMING COURSES

Here is some information about available AOD training and education for clinicians:

### Opioid treatment accreditation course (OTAC)

For those interested in becoming a registered prescriber under the NSW Opioid Treatment Program, please visit [www.otac.org.au](http://www.otac.org.au)

The OTAC course involves a short online Fundamentals Training Course that is truly excellent, a one-day face-to-face session and a half-day clinic attachment.

### Sydney North Primary Health Network

Keep abreast of training and education opportunities via the weekly events update. Project opportunities are often sent from the communications department.

>> [visit website](#)

### RACGP

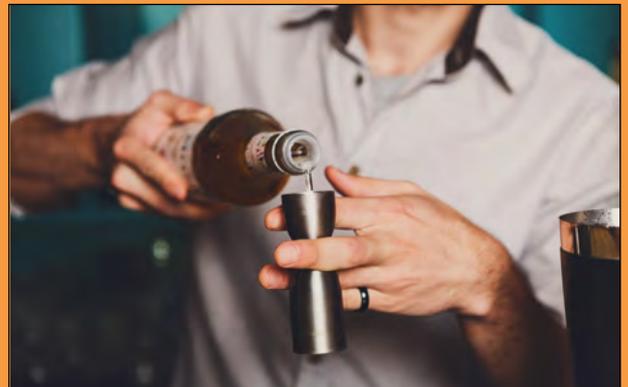
Courses are frequently advertised on the RACGP website both online and face to face.

>> [visit website](#)



## POP QUIZ ANSWERS

- 1 - 0.8 standard drinks – sherry is a fortified wine so usually ~18% alcohol by volume.
- 2 - 0.67 standard drinks – spirits are ~40% alcohol by volume. I calculated using [this recipe](#).
- 3 - 1.4 standard drinks – full strength beer is 4.8% alcohol by volume, 1 mid strength stubbie is 1 standard drink.
- 4 - 0.9 standard drinks as white wine is typically 11.5% alcohol by volume. Red wine is 13% alcohol by volume so 100mls is 1 standard drink.



Merry  
Christmas  
AND  
HAPPY NEW YEAR

