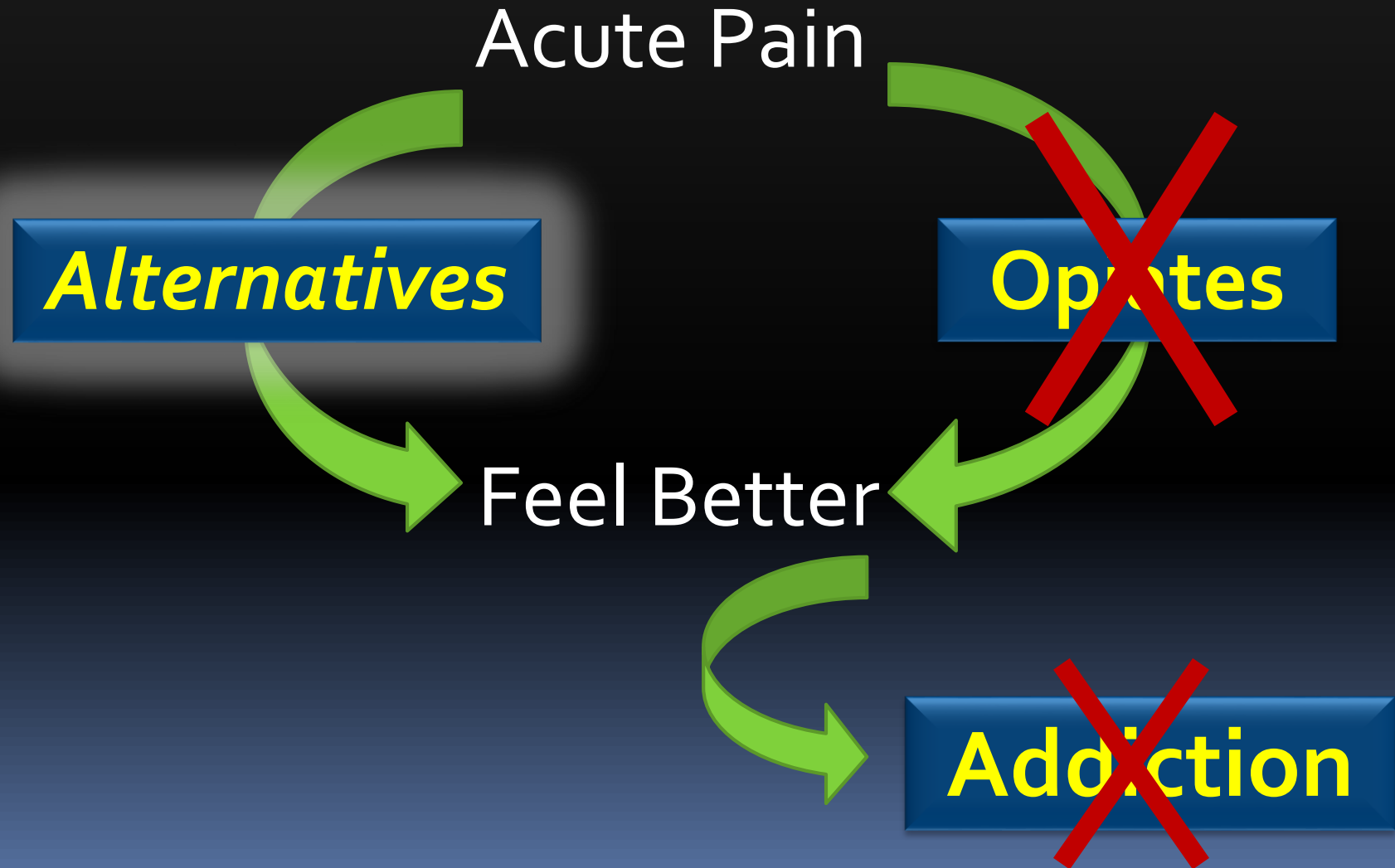


Alexis M. LaPietra, DO
Interim Chair, ACEP Pain Management Section
Medical Director EM Pain Management
St. Joseph's Healthcare System
Paterson, NJ



THE ALTOSM PROGRAM

What can we do in the ER?





The ALTOSM Program

- “Alternatives To Opiates”
 - St. Joseph’s Regional Medical Center, Paterson, NJ went live January 4, 2016
- Multi-modal non-opioid approach to analgesia for specific conditions

The ALTOSM Objectives

- The goal is to utilize non-opioid approaches as first line therapy, and educate our patients.
 - Exhaust **alternatives** first
 - Opioids will be used as a **second line** treatment or **rescue medication**
 - Discuss **realistic** pain management goals without patients
 - Discuss **addiction potential** and side effects with using opioids


Opioids are necessary.....

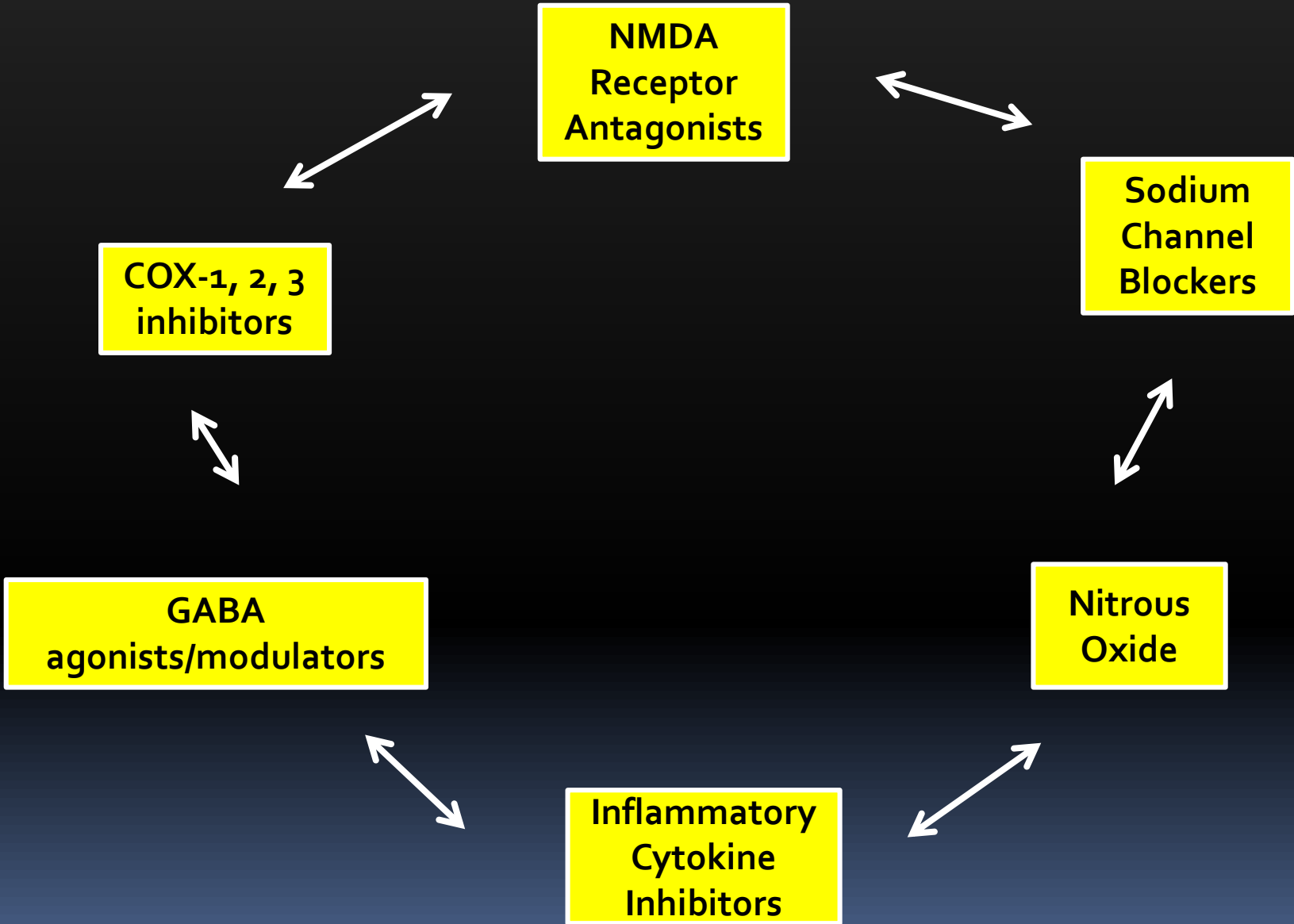
.....but they are not the solution for all pain

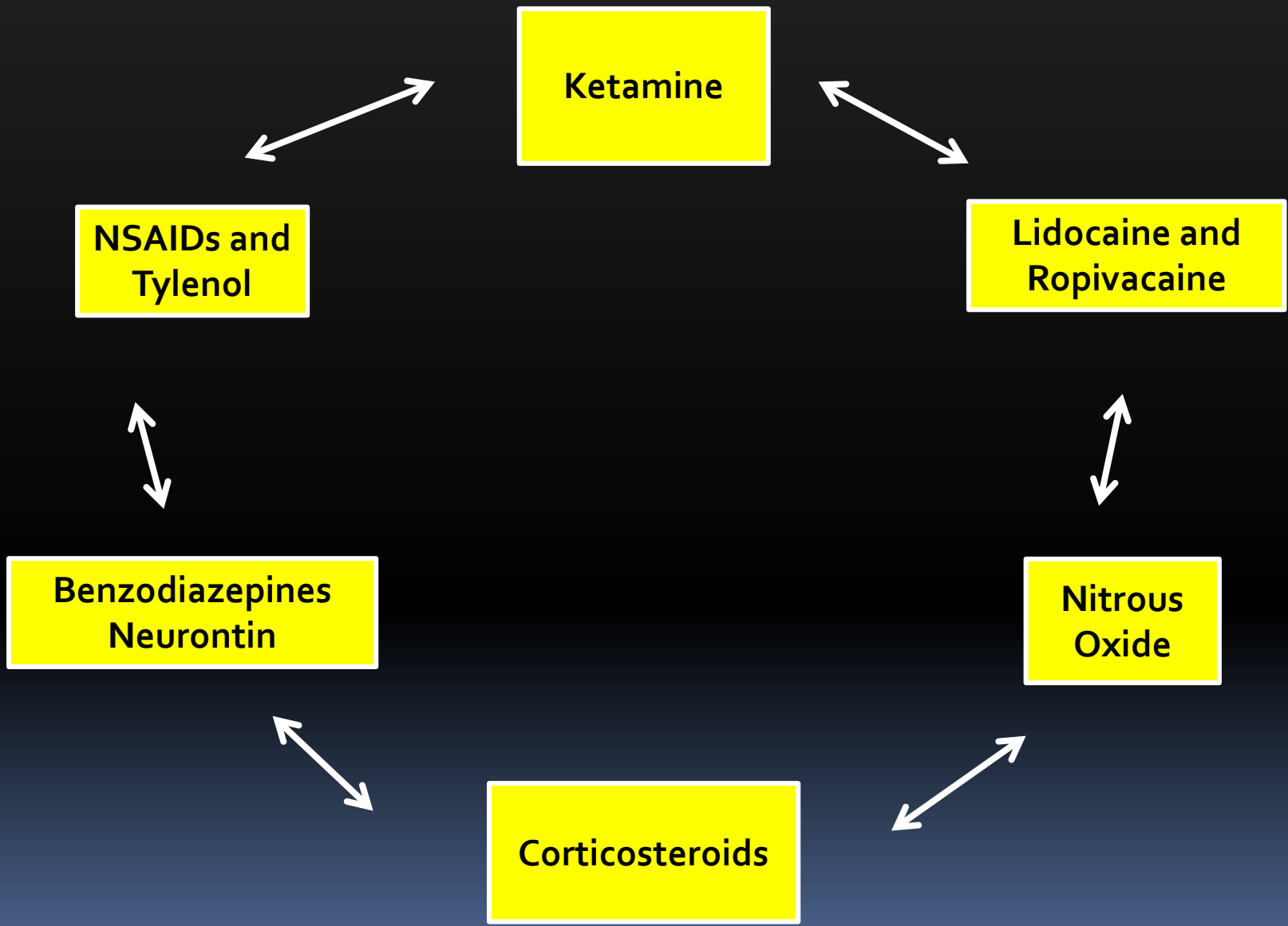
- **THINK** before you prescribe
- **USE** alternatives whenever possible
- **CARE** about the patient , addiction is a disease



Targeted Treatment


- By identifying the generator of pain physicians can target treatment to that area
 - Flooding the body with opioids only masks that pain to the brain, but does not actually address the underlying case
- 








ALTOSM Conditions

- Acute low back pain
 - Lumbar radiculopathy
 - Renal colic
 - Migraine
 - Extremity fracture/Dislocation
- 

Acute Low Back Pain Alternatives

- NSAIDS
 - Trigger Point Injection
- Tylenol
- Topicals
 - Muscle Relaxants
 - Lidoderm, Voltaren, Flector

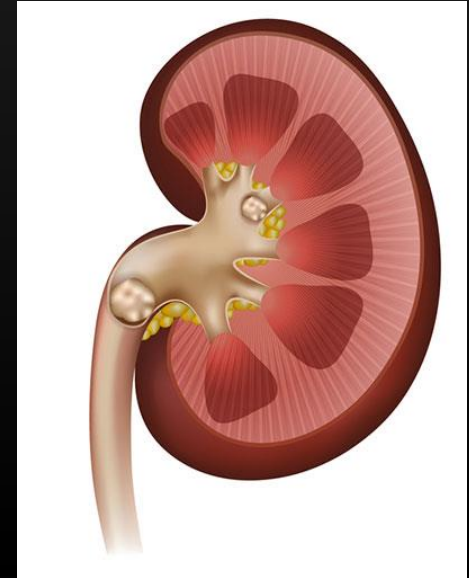


Lumbar Radiculopathy Opioid Tolerant Patients

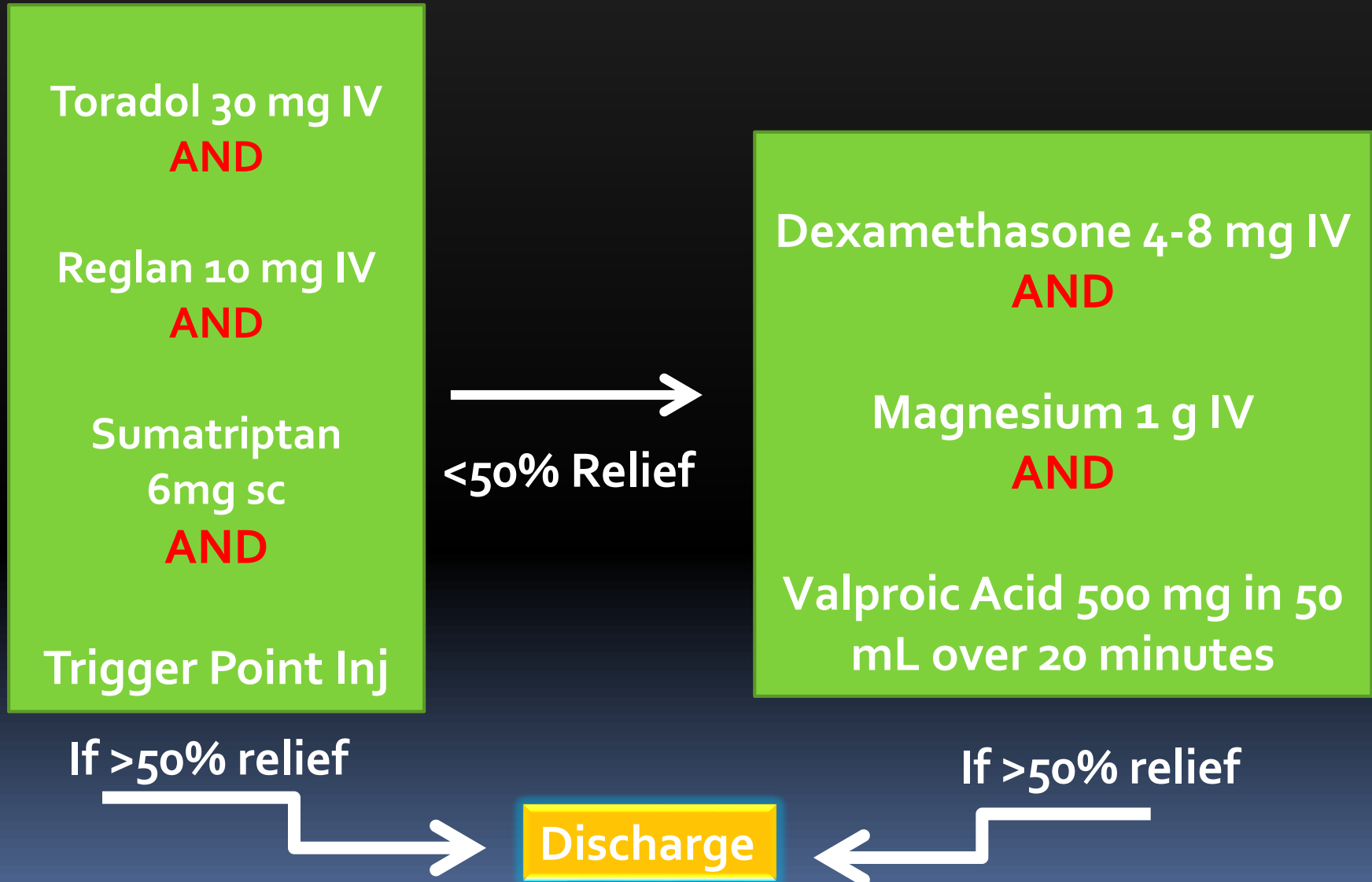
- NSAID + Tylenol
- Gabapentin
- Valium or Flexeril
- **Ketamine infusion + drip**

Renal Colic

- Toradol 30 mg IV
- Tylenol 1000 mg PO
- 1 L 0.9% normal saline
- Cardiac Lidocaine 1.5 mg/kg over 10 minutes
 - Max 200 mg

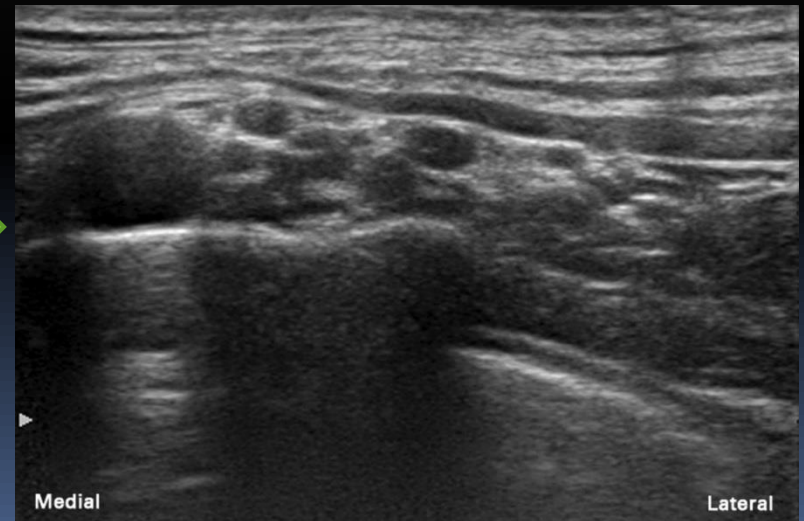


Migraine Algorithm



Extremity Fracture Joint Dislocation

Ultrasound Guided Regional Anesthesia




Nitrous Oxide



Nitrous Oxide Evidence

- It indicated for any and every painful condition
- All ages



- Laceration repair
- Lumbar puncture
- Peripheral or central access
- Incision & Drainage
- Foreign Body removal
- Burn/Wound Care




ALTOSM Partnerships

- Departments
 - Physical Therapy
 - Family Medicine
 - Psychiatry
 - Chronic Pain Management
- 




Future ALTOSM Goals

- Suboxone in the ED
 - Acupuncture in the ED
 - Expansion to inpatient units
- 



ALTOSM Partnerships

- St. Joseph's Opioid Overdose Prevention and Naloxone Distribution Program
 - Eva's Village
 - Peer Counselors
 - Straight and Narrow Program
- 



Education

- Emergency Medicine Residency Pain Management Curriculum
 - Didactics + Hands on teaching
 - Pain Management Rotation
 - USRA and more
 - Emergency Medicine Pain Management Fellowship, *first of its kind*
 - Dr. Adelaide Viguri
- 

ALTOSM results

First 3 months

- N= 1600 patients
- **47.6% reduction** in opioids for acute low back pain, renal colic, and headache
 - p= 0.0001
- Pain scores pre-ALTO 8 → 1.9
- Pain score post-ALTO 7.9 → 2.0
 - p=0.001



If you'd like to know more

1st ACEP Pain Management Section
meeting

Sunday October 16th at 5 pm
Tradewinds B



lapietra@sjhmc.org