

Opiate Abuse and the Growing Impact on Maternal and Child Health in West Virginia

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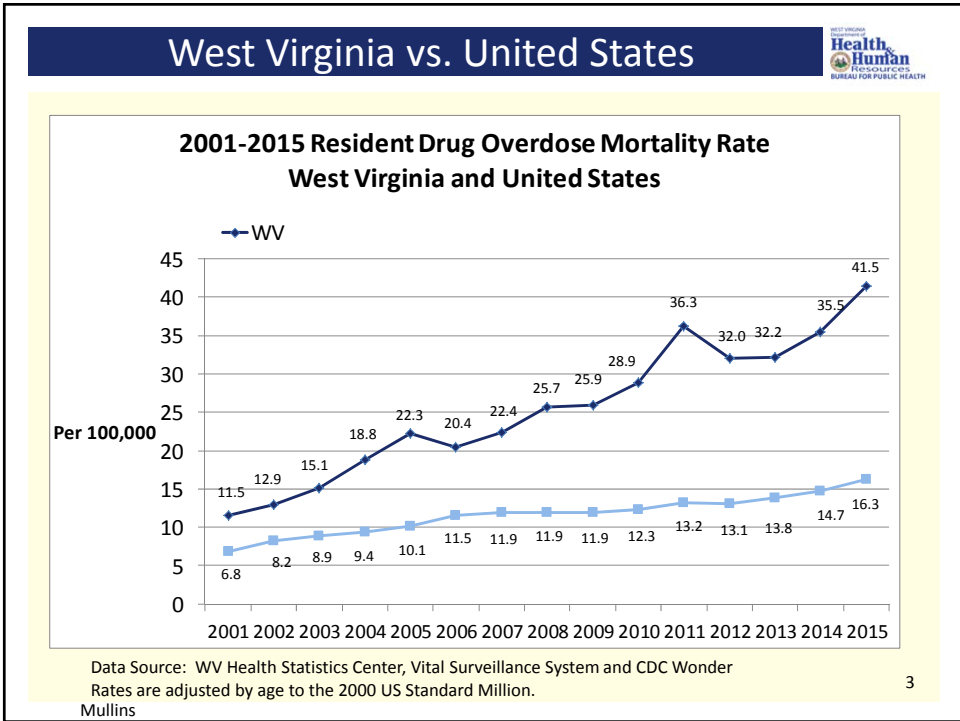
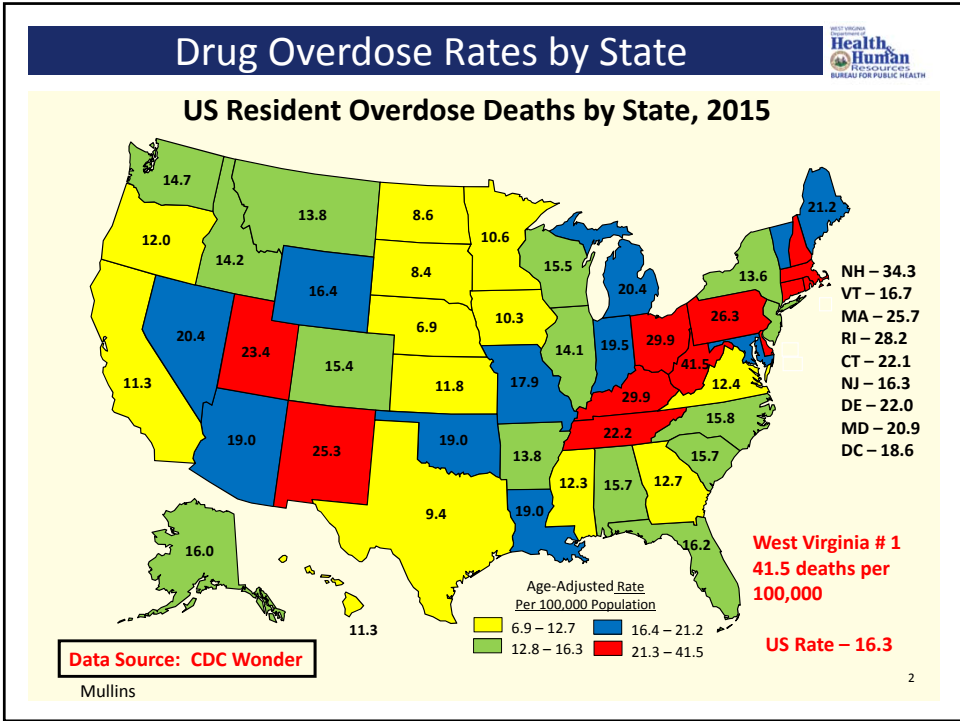
Overview



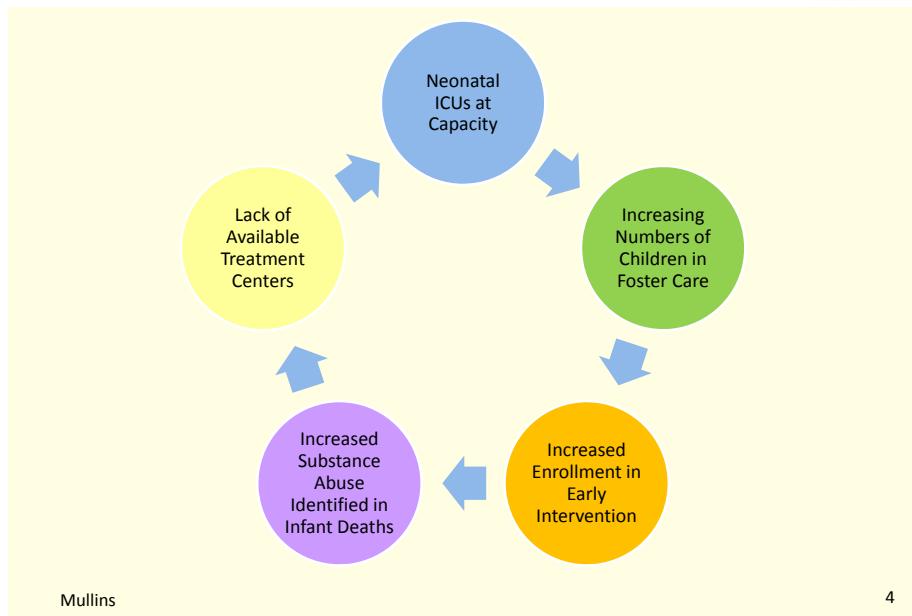
- Describe the epidemic in West Virginia.
- Discuss the collaborative relationships used to develop the Drug Free Moms and Babies Project.
- Provide an overview of key strategies and results.
- Discuss lessons learned.

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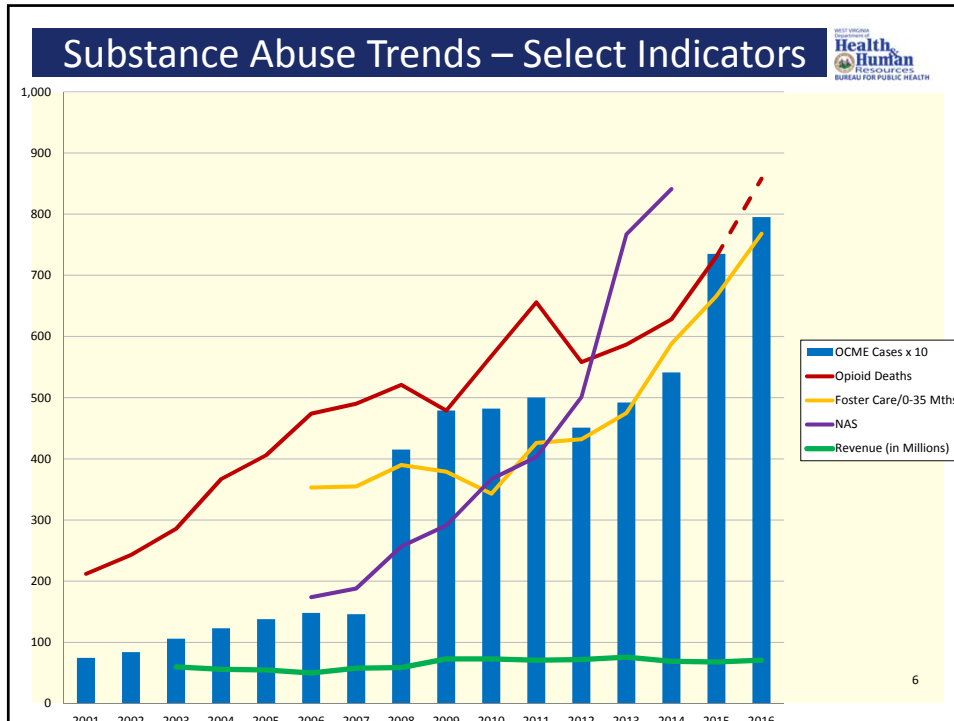
Maternal and Child Health Impact



CoIIN

Infant Mortality Innovation and Improvement Network (CoIIN)

- SIDS/SUID/Safe Sleep
 - Improve safe sleep practices.
- Smoking Cessation
 - Reduce smoking before, during and/or after pregnancy.
- Prevention of preterm and early term births
 - Increase appropriate utilization of 17-P OH progesterone and/or reduce early elective deliveries.



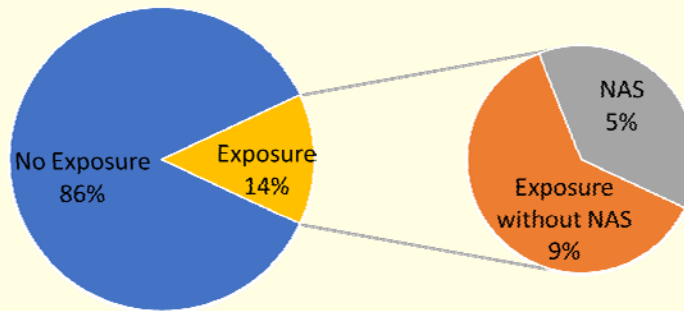
Standardized Definition

- In September 2014, West Virginia neonatologists and pediatricians met with coders and members of the Perinatal Partnership to develop a standardized definition for neonatal withdrawal and guidance on documenting exposure and withdrawal in newborns.
 - Neonatal Abstinence Syndrome (NAS) includes neonatal withdrawal from many substances, not just opiates;
 - It is exposure with clinical symptoms; and
 - It is *not* limited to those cases that require pharmacological treatment.

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Intrauterine Substance Exposure

October 2016 - August 2017



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Initial Challenges



Data



Infrastructure



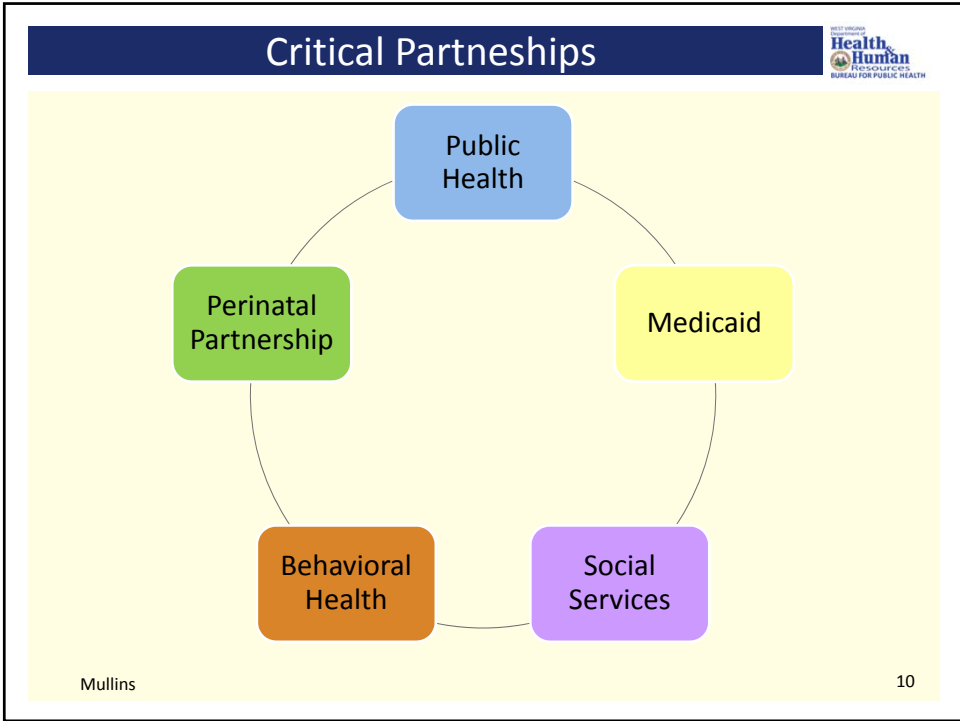
Expertise



Treatment
Options

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- ## Perinatal Partnership
- Founded in 2006 to bring together individuals and organizations involved in all aspects of perinatal care.
 - The Partnership formed the Substance Use in Pregnancy Committee to:
 - Make policy recommendations;
 - Identify best practices; and
 - Develop a collaborative and coordinated approach to best meet the needs of this high risk population.
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Funders

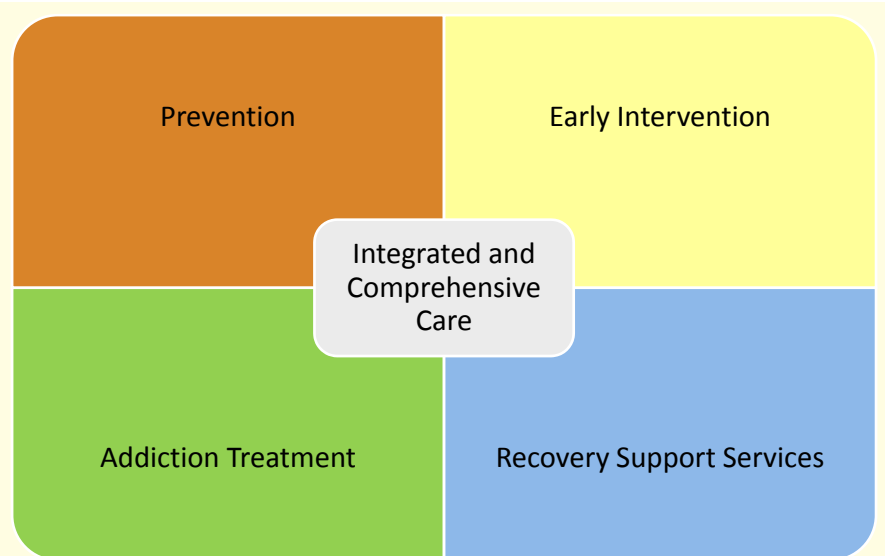


- Claude Worthington Benedum Foundation
- West Virginia Department of Health and Human Resources
 - Bureau for Behavioral Health and Health Facilities
 - Bureau for Public Health, Maternal Child and Family Health

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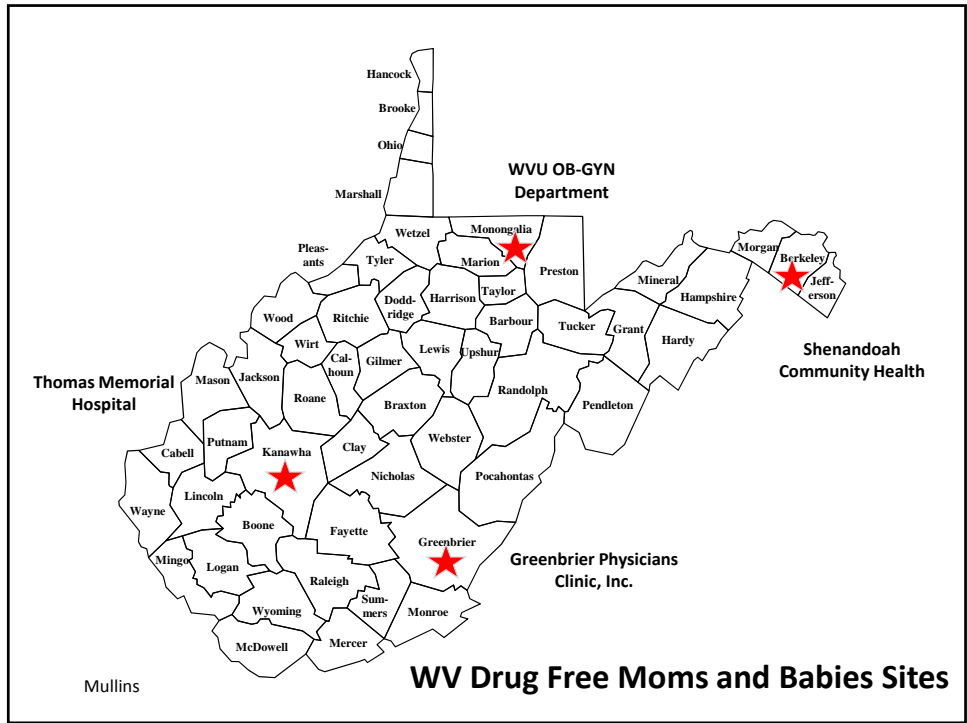
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Drug Free Moms and Babies




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Key Aspects




- Uniform Screening
- Integrated and Comprehensive Care
- Long-Term Follow-Up
- Program Evaluation
- Provider Outreach

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Results



Improved Identification

Increased Collaboration

Availability of Case Management


429 Participants

Increase in Self-Referrals

72-95% Negative for Illicit Substance at Delivery

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Lessons Learned



- Requires investments in time, flexibility, and patience.
- Trust takes time and affects early enrollment.
- Transportation and childcare are significant barriers.
- Co-morbidities are common and complicate treatment.
- Coordinating care with physicians in private practice is difficult.
- Following women past the postpartum period is challenging.
- Recovery coaching services are often hard to locate and may be difficult to manage.
- Sustainability plans should be incorporated early.

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Contact Information



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