Patient characteristics and clinical outcomes associated with use of in-hospital supervised consumption services by emergency department patients: a cohort study

Category: Oral Presentation

Abstract Body

People who experience drug poisoning are more likely to have accessed the emergency department (ED) within the last year, than those in the general population. Access to supervised consumption services (SCS) has been shown to decrease the number of fatal drug poisonings, increase safer use practices and facilitate engagement into addiction treatment programs. We sought to describe the ED population utilizing Canada's first hospital based SCS at a tertiary care hospital including patient characteristics, adverse events, SCS interventions and ED visit outcomes.

This is a single center retrospective cohort study. The first 50 ED patients ≥18 years old who accessed the SCS from the ED at the Royal Alexandra Hospital (Edmonton, Albert) were reviewed. Data was abstracted from the Emergency Department Information System, the patients' paper medical charts, and the SCS database by two independent reviewers. Data extracted by both reviewers was compared and discrepancies were resolved by reviewing the source documents. Any discrepancies that could not be resolved were discussed with the rest of the team to reach consensus.

50 patients made 65 SCS visits during their ED stay. 31 patients visited the SCS once during their ED visit, while 9 patients utilized the SCS multiple times in one ED visit. The mean patient age was 37.4 years. 11 patients (22%) indicated they had housing, while 30 (n=60%) were houseless. The two most common classes of substances patients reported using were opioids (n=46 patients, 60%) and stimulants (n=27, 36%). Clean supplies were given to 100% of patients. Clinical concerns were identified in 6% (n=6) of SCS visits. Identified concerns included opioid toxicity (n=3, 92%), 'drowsy but rousable' (n=2, 4%), and rigidity (n=1, 2%). 32 patients (39.5%) were referred to the on-site addiction medicine consult service; 18 patients (22%) were referred to General Internal Medicine. Of note, 64 medical consults were made in total on 50 patients. Overall, 19 patients (38%) were admitted, 16 patients (32%) were discharged with approval, 12 patients (24%) left without being seen by an ED physician, 2 left prior to completion of treatment (4%), and 1 left against medical advice (2%).

ED patients at our hospital were willing to access supervised consumption services when available. Adverse events related to substance use were minimal and all were attended to immediately by SCS/ED staff. All patients recovered uneventfully.

Key Words

- Medical Co-Morbidities
- Opiate Agonist Therapy
- Prevention/Harm Reduction
- Quality Improvement
- Substance Use Disorder (general)

Learning Objective # 1
Describe potential adverse outcomes for patients accessing Supervised Consumption Services from the Emergency Department

Learning Objective # 2
Describe general patient characteristics of patients who access Supervised Consumption Services from the Emergency Department

Reference # 1
Potier C, Laprévote V, Dubois-Arber F, Cottencin O, Rolland B. Supervised injection services: What has been demonstrated? A systematic literature review. Drug and Alcohol Dependence. 2014; 145:48-68.

Reference # 2
Otterstatter MC, Crabtree A, Dobrer S, Kinniburgh B, Klar S, Leamon A, May-Hadford J, Mill C, Park M, Tu AW, Zheng L. Patterns of health care utilisation among people who overdosed from illegal drugs: a descriptive analysis using the BC Provincial Overdose Cohort. Health Promot Chronic Dis Prev Can. 2018 Sep;38(9):328-333. doi: 10.24095/hpcdp.38.9.04. PMID: 30226726; PMCID: PMC6169704.

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