

Reducing Opioids Given to Infants of Mothers with Opioid Use Disorder Using Eat, Sleep, Console

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INTRODUCTION

Opioid use disorder in pregnancy has increased from 1.19% to 5.63% per 1000 live births in the United States

Infants with neonatal abstinence syndrome (NAS) increased from 1.2% to 3.4% per number of live births

Infants with NAS are often treated pharmacologically with opioids after being assessed using the Finnegan Neonatal Abstinence Scoring System (FNASS)

American Academy of Pediatrics recommends first-line therapy to focus on non-pharmacologic interventions

OBJECTIVE

To reduce pharmacological interventions for infants diagnosed with NAS at St. Mary's Hospital using the Eat, Sleep, Console (ESC) method of assessment

INTERVENTION

Eat, Sleep, Console method of assessment replaced the FNASS for infants at risk of NAS in April 2019

Infants were admitted to the Pediatrics unit instead of the Neonatal Intensive Care Unit (NICU)

Multidisciplinary team created educational materials and algorithms

Education provided to all staff members regarding ESC

Parents were educated on the new assessment tool and on methods to help console their infant



RESULTS

Baseline data (January 2017-December 2018)

76 infants

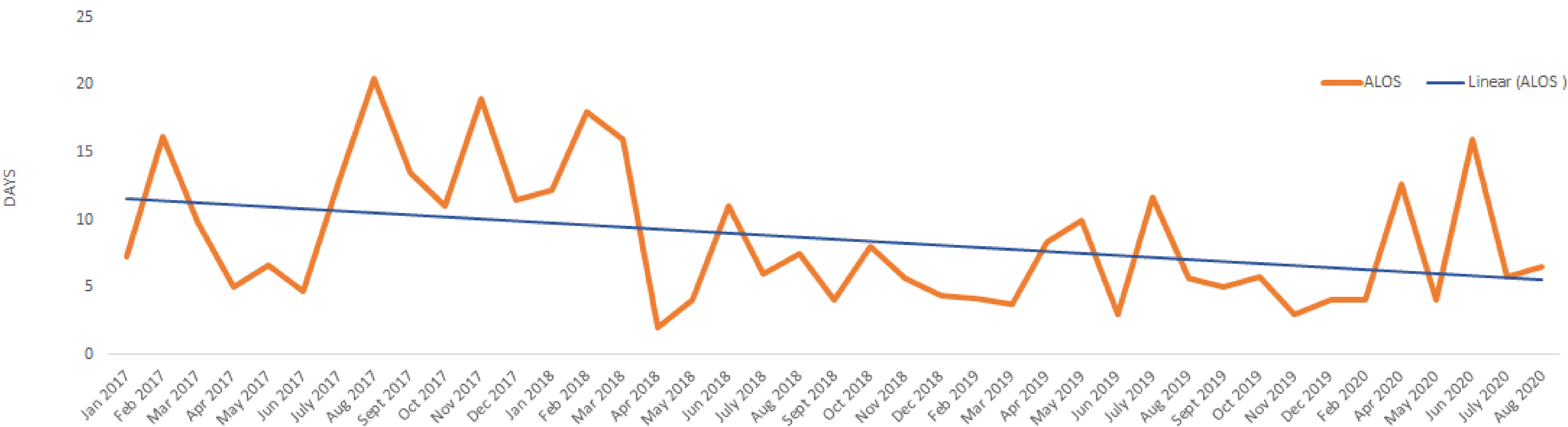
- Average length of stay: 9.86 days
- Average number of infants assessed for NAS given Morphine: 38%

Post-Implementation (April 2019-August 2020)

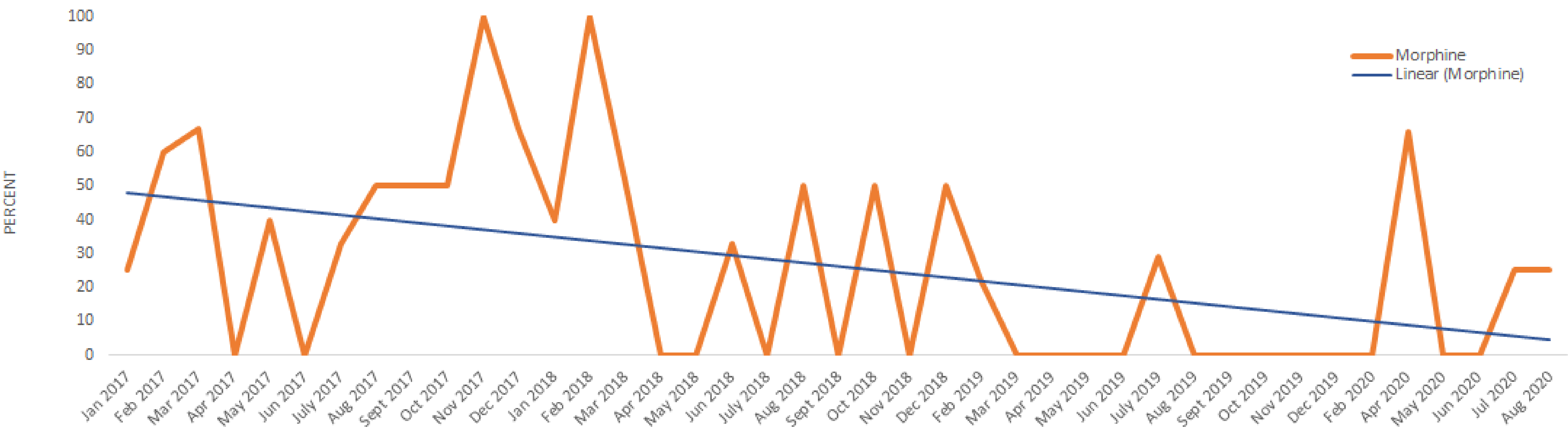
52 Infants

- Average length of stay: 7 days
- Average number of infants assessed for NAS given Morphine: 9%

Average Length of Stay



Percent of Infants Assessed for NAS given Morphine



CONCLUSION

Goal of using ESC method is not to eliminate the use of opioids to treat NAS, but to assess each infant individually and use non-pharmacologic methods first

Our rate of opioid administration significantly decreased and ALOS was also reduced

ESC method appeared safe at our institution as there were no seizures or readmissions related to signs of withdrawal

Positive nursing, physician, and parent satisfaction reported

Future directions :

- Dissemination to state/region
- Continue to track data to evaluate outcomes
- Evaluate hospital cost
- Develop modified ESC method for NICU patients

REFERENCES

Grossman, MR, et al. An Initiative to Improve the Quality of Care of Infants with Neonatal Abstinence Syndrome. *Pediatrics* 2017; 139

Hudak ML, Tan RC; Committee on Drugs; Committee on Fetus and Newborn; American Academy of Pediatrics. Neonatal drug withdrawal. *Pediatrics*. 2012; 129 (2)

