TITLE: Education and Assessment for Overdose Prevention: Clinical Evidence and Guidelines

DATE: 02 Nov 2016

RESEARCH QUESTIONS

1. What is the clinical effectiveness of education programs for opioid users or health care providers for preventing overdose?

2. What is the clinical effectiveness of tools to determine the risk of misuse or overdose for preventing overdose?

3. What are the evidence-based guidelines for determining the risk of misuse or overdose?

KEY FINDINGS

One systematic review, one non-randomized study and two evidence-based guidelines were identified regarding opioid use and misuse.

METHODS

This report makes use of a literature search developed for a previous CADTH report. The original literature search was conducted in August 2015 on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. Methodological filters were applied to limit retrieval to health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, and guidelines. Where possible, retrieval was limited to the human population. The initial search was also limited to English-language documents published between January 1, 2010 and August 24, 2015. For the current report, database searches were rerun on October 26, 2016 to capture any articles published since the initial search date. The search of major health technology agencies was also updated to include documents published since August 2015.
SELECTION CRITERIA

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

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<th>Table 1: Selection Criteria</th>
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<td>Population</td>
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| Intervention               | Q1: Education of health care providers, staff, or patients  
Q2 and Q3: Tools to assess the risk of opioid misuse or overdose |
| Comparator                 | Standard care |
| Outcomes                   | Q1 and Q2: Reduction in overdose or overdose-related harms, reduction in opioid misuse, identification of misuse or overdose risk,  
Q3: Evidence-based guidelines |
| Study Designs              | Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, evidence-based guidelines |

RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

One systematic review, one non-randomized study and two evidence-based guidelines were identified regarding opioid use and misuse. No relevant health technology assessments or randomized controlled trials were identified.

Additional references of potential interest are provided in the appendix.

Health Technology Assessments
No literature identified.

Systematic Reviews and Meta-analyses


Randomized Controlled Trials
No literature identified.

Non-Randomized Studies

Guidelines and Recommendations

See: Assessing Risk and Addressing Harms of Opioid Use (Recommendations 8 to 12)

See: ‘Misuse,’ ‘risk assessment’ and ‘overdose’ mentioned throughout

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APPENDIX – FURTHER INFORMATION:

Previous CADTH Reports


Randomized Controlled Trials – Alternate Intervention


Non-Randomized Studies – Alternate Outcomes


Review Articles
