

## Safer Supply of Hydromorphone (Dilaudid®) in Combination with Opioid Agonist Therapy (OAT)

The purpose of this fact sheet<sup>1</sup> is to provide information about prescribing hydromorphone in a safer supply context in combination with OAT. If you have any questions after reading this sheet, please contact us so that we can clarify the situation and work together to provide the best support to the person undergoing treatment:

## [Organization name]

[Prescriber's name and phone number]

[Nurse's name and phone number]

## What is safer supply?

Safer supply, also known as substance replacement therapy, is a treatment approach that seeks to replace psychoactive substances purchased on the illicit market with pharmaceutical substances of known and stable content. This practice, emerging in Canada, is being implemented from a public health perspective to reduce the harm associated with substance use and prevent sometimes fatal overdoses. It is not primarily intended as a treatment for a substance use disorder.

While the prescribed OAT molecule (methadone, buprenorphine-naloxone or slow-release oral morphine) can be taken either daily under supervision or taken home, prescribed hydromorphone tablets are usually provided to the person on a daily basis for later, and therefore unsupervised, use. Because this approach differs from the usual standards of practice, the partner care team<sup>2</sup> will have first weighed the associated benefits and risks with the person concerned. Prescribing safer supply opioids is most often associated with an NPS-C code, as the original formulation of hydromorphone (Dilaudid®) seems to present fewer injection-related complications than generic formulations.

It is important to provide essential harm reduction supplies at each of the person's pharmacy visits, such as drug use equipment (safe injection kits) and a take-home naloxone kit. Lastly, to ensure treatment cohesion and the safety of both the person and others, it is important to optimize communication between the various partner care team professionals and the person in treatment.

## More information

A series of tools related to safer supply has been developed by the Équipe de soutien clinique et organisationnel en dépendance et itinérance (ESCODI) in collaboration with various Québec experts. It can be accessed at: http://bit.ly/pharmacoaps

ESCODI provides clinical and organizational support. The team is readily available to support you in this new practice.

Phone and text support available Monday to Friday, 9 a.m. to 5 p.m. @ 514 863-7234 soutien.dependance.itinerance.ccsmtl@ssss.gouv.qc.ca http://dependanceitinerance.ca

<sup>&</sup>lt;sup>1</sup> We wish to thank Dr. Violaine Germain for sharing a previous version of this document.

<sup>&</sup>lt;sup>2</sup> Partner care team: This refers to the interdisciplinary team that closely supports the person in treatment, i.e. a physician, a nurse, a psychosocial worker, a peer helper and a community pharmacist. (Goyer et al., 2020, p. 17)