HUSHABYE NURSERY The Tiniest Victims of the Opioid Crisis



Objectives

- What is Neonatal Abstinence Syndrome (NAS)?
- What causes NAS?
- Signs and Symptoms of NAS?
- Treatment of NAS?
- Follow up for babies with NAS?
- Medication assisted treatment- What is it?
- What is Hushabye Nursery's care model? Why Hushabye?

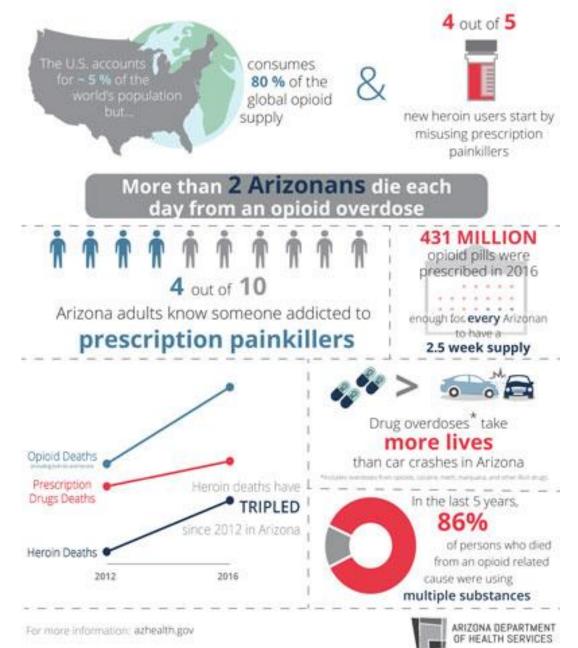


Every day, more than **2 babies** are born passively dependent in AZ.





Opioid Epidemic In Arizona





Neonatal Abstinence Syndrome

Condition experienced by an infant after birth due to sudden discontinuation of exposure to certain drugs such as opioids that were used by their mother during pregnancy.



Prabhakar Kocherlakota

Pediatrics Aug 2014, 134 (2) e547e561; DOI: 10.1542/peds.2013-3524

NAS Withdrawal Symptoms Similar to an adult Can last up to 1 year of age

- Vomiting
- Diarrhea
- Mottling of skin
- Skin breakdown
- Tremors, jittery
- Sweating

- Inconsolable high-pitched cry
- Poor feeding or excessive sucking
- Inability to sleep
- Stuffy nose and sneezing
- Increased breathing rate
- Seizures



HOPPE What if we started prenatally?

- Congratulations!!!
- Connect with Obstetrician/ Perinatology Consult
- Birthing classes (OUD/SUD specific)
- No THC
- DCS plan
- SENSE program
- Identify Safety Monitors
- Withdrawal Symptoms and Interventions
- Breastfeeding
- HIV/Hepatitis C status and Counseling



Management of NAS Non-pharmacologic care

-Parents, Parents, Parents!!!

-Decreasing stimulation

Turning the lights down

Quiet environment

- -Skin-to-skin
- -Rooming-in or Nesting
- -Nutrition- small frequent feedings, warm the bottle
- -Breastfeeding, if not contraindicated
- -Infant Massage

-Warm compresses to tummy

Rooming-In to Treat Neonatal Abstinence Syndrome: Improved Family-Centered Care at Lower CostAlison Volpe Holmes, Emily C. Atwood, Bonny Whalen, Johanna Beliveau, J. DeanJarvis, John C. Matulis, Shawn L. Ralston Pediatrics Jun 2016, 137 (6) e20152929; **DOI:** 10.1542/peds.2015-2929



Management of NAS Non-pharmacologic care: teach parents!

- Your baby will be sensitive to light, sound and touch.
- Keep the surroundings calm and quiet.
- Limit visitors.
- Mute your cell phone.
- Only wake babies for feedings if necessary.
- Let your baby sleep. It is very important for them to rest well.
- Avoid rubbing and stroking, gently pat to provide extra comfort.
- Smoking can be an irritant.



Current NICU Environment





Opioid Use Disorder (OUD)

A Brain Disease, not a moral failure!

How we talk impacts the way we think.

Improved understanding that **opioid use disorder** is a complex interplay of biology and environment will decrease stigmatize and increase access to healthcare.



Maternal OUD Treatment Cold Turkey

Why not???

- Increases the risk of miscarriage
- High incidence of relapse
- Not recommended by ACOG currently



Medication-Assisted Treatment (MAT)

Harm Reduction and Evidence-Based Treatment for OUD

- Combines behavioral therapy and medications to treat substance use disorders
- Proven efficacy with Opioid Use Disorder



Medication-Assisted Treatment (MAT)

Methadone, Buprenorphine (Subutex), Suboxone (Buprenorphine/Naloxone), Naltrexone (Vivitrol)

- Decrease HIV/AIDS
- Decrease mortality
- Decrease healthcare costs
- Decrease in drug-related crime
- Decrease IV drug use
- Improved family stability
- Improved pregnancy outcomes



Adverse Childhood Experiences Study (1998)- 7 Domains

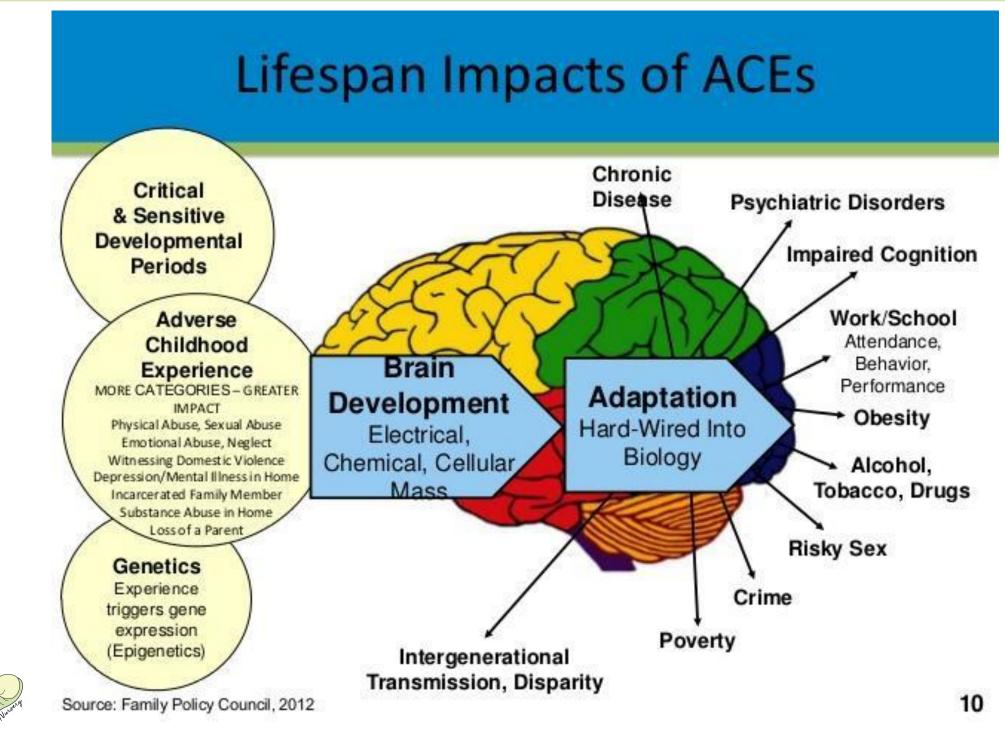
3 Types of Abuse

- Physical
- Sexual
- Emotional
- Mental Illness in household
- Substance abuse in household
- Evidence of Criminal Activity in household
- Mother abused in the household



Pediatrics<u>March 2003, VOLUME 111 / ISSUE 3</u>Abuse, Neglect, and Household Dysfunction and the Risk of Illicit Drug Use: The Adverse Childhood Experiences Study Shanta R. Dube, Vincent J. Felitti, Maxia Dong, Daniel P. Chapman, Wayne H. Giles, Robert F. Anda





ACE's

Event + Experience + Effect

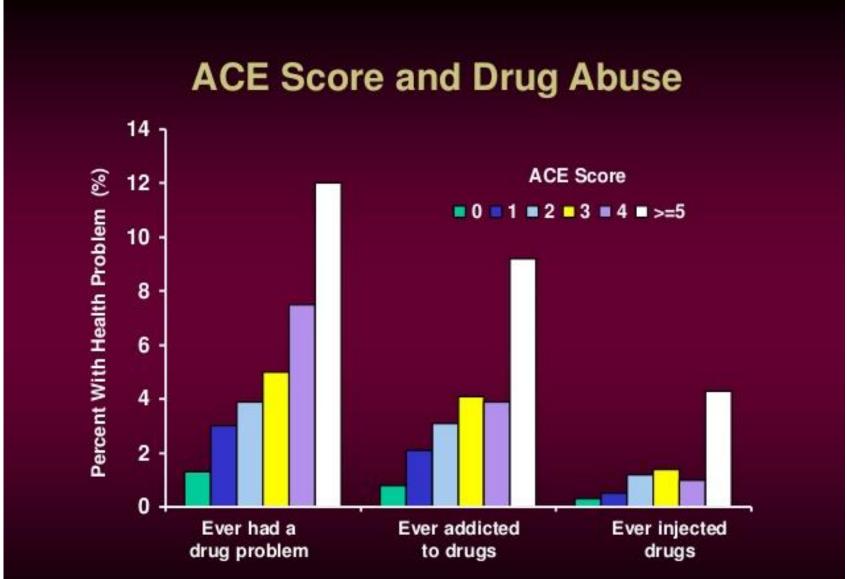
- LIVING WITH SOMEONE WHO IS MENTALLY ILL or SUICIDAL
- LIVING WITH SOMEONE WHO HAS AN ALCOHOL OR DRUG PROBLEM
- EXPERIENCING SOCIOECONOMIC HARDSHIP
- BEING TREATED OR JUDGED UNFAIRLY DUE TO RACE, ETHNICITY, OR IDENTITY
- HAVING A PARENT IN JAIL
- EXPERIENCING THE DEATH OF PARENT
- EXPERIENCING DIVORCE OR PARENTAL SEPARATION
- WITNESSING DOMESTIC VIOLENCE
- BEING A VICTIM OR WITNESS OF NEIGHBORHOOD VIOLENCE



The Future???

NAS babies have 2 or 3+ ACE's at birth.







HUSHABYE NURSERY

Recovery Center for Neonatal Abstinence Syndrome



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Hushabye Nursery is Different.

NICU Model

Treat babies in bright, noisy, intense environment Design NICU for premature babies, not NAS babies Provide minimal education/limited resources Restrict visitation and prohibit overnight stays Ensure one caregiver to every three babies (1:3) Staff teams with limited NAS training

Hushabye Model

Treat babies in quiet, dark, calm environment Design nursery with one crib per room Educate families on how to care for NAS baby Encourage moms to stay in-room 24/7 Ensure one caregiver per baby (1:1) Hire specially-trained staff with passion for NAS babies Promote bonding and breastfeeding Use five Ss, rock up and down, 6th S-squat techniques Wean and treat babies with medications as necessary Validate Finnegan Neonatal Abstinence Scoring System Provide physical, speech, occupational therapy



Hushabye Nursery will make a Difference.

4

We will care for babies, support families, and save taxpayer dollars, resulting in:

Collective Impact

By connecting community partners, we will build collaboration and connect the silos.

3

Reduced Costs

By providing specialized care and wraparound services, we will save money throughout their entire lives.

Stronger Families 2

By providing wraparound services (including DCS Safe Model), we will help families stay together.

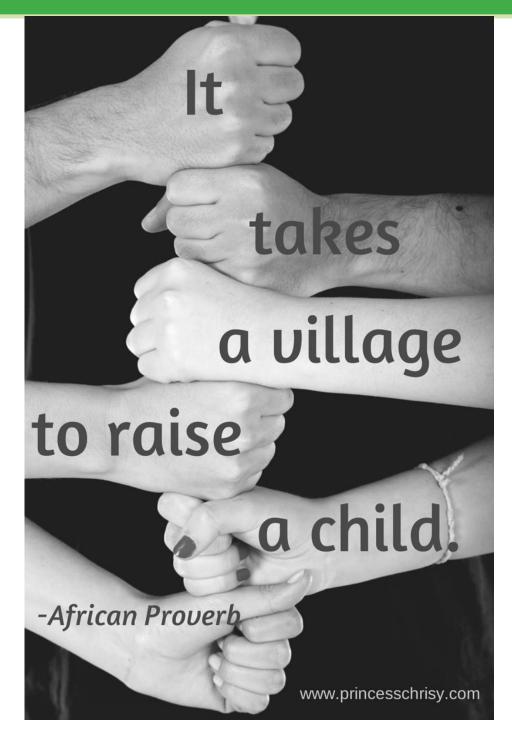
Better Outcomes

By caring for NAS babies – the tiniest victims of the opioid epidemic - we will build brighter futures.



Future Impact of Hushabye Nursery









Thank you