

UC San Diego

Family Medicine Research Symposium 2025

Title

Improving Substance Use Treatment in Family Medicine Clinics

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Background

From 2007 to 2017, San Diego experienced nearly 3000 deaths by overdose. As the only academic family medicine (FM) residency in the region, we realize that we must provide the highest quality care for patients with substance use disorder (SUD). For many years, UCSD FM was affiliated with Father Joe's Villages Health Center, the city's only clinic dedicated to serving people experiencing homelessness. Father Joe's Villages Health Center had a robust medication-assisted treatment program, which provided our residents with excellent training. When that relationship ended, a group of residents and faculty recognized the need to bring the same level of high quality SUD clinical care and training to our own UCSD FM clinics.

Since 2018, our FM residency didactics program has had an addiction medicine curriculum, that included X-Waiver training. However, internal survey data revealed that while many residents were obtaining their X-waivers, most of our faculty were not. An internal needs assessment subsequently showed that 87% of our residents and faculty felt uncomfortable treating SUDs, and 95% of physicians reported their panels had none or few patients with SUDs, which does not align with regional nor national data on SUD prevalence.

In March 2023, we were awarded a 1-year grant through the California Residency Program Collaborative, with the hope to achieve 3 aims: (1) to analyze our screening rates of SUDs; (2) to build upon our existing Addiction Medicine curriculum and extend it to the faculty; (3) to develop a standardized clinical protocol for the identification, treatment and monitoring of patients with SUDs. This work is still in process.

Simplified Project Description

1. Implement adding the TAPS screening tool to our FM clinic visits
2. Create a new SmartSet to guide diagnoses, documentation, labs, medications, referrals, follow up, etc to simplify providing SUD patient care
3. Create and teach a new curriculum on SUD to our UCSD FM Department
4. Analyze outcomes of patient diagnosis rates, physician comfort in treating SUD, and utility of created Smart Set

Preliminary Data

The 3 academic UCSD Family Medicine (FM) clinics have a strikingly lower prevalence of patients identified as having a substance use disorder (SUD) than national averages. Data from the National Survey on Drug Use and Health (NSDUH) has reported that nationally SUD prevalence is estimated to be at 17.3%. However, it was found that only 3.3% of the patient population at UCSD FM academic clinics were diagnosed with a substance use related condition. Prior studies have shown that health professionals generally have negative attitudes towards patients with SUD, and that many health

professionals lack adequate education, training, or support structures to treat this population¹. Studies have also shown that general practitioners have less regard and more reported feelings of anger and fear when working with patients with SUD as compared to psychiatry and addiction specialist colleagues². Much effort is now being made to improve the identification and treatment of those with a SUD at UCSD FM academic clinics.

Results and Conclusion

pending

1. Van Boekel, Leonieke C., et al. "Stigma among health professionals towards patients with

substance use disorders and its consequences for healthcare delivery: Systematic review."

Drug and Alcohol Dependence, vol. 131, no. 1–2, 2013, pp. 23–35,

<https://doi.org/10.1016/j.drugalcdep.2013.02.018>.

2. Van Boekel, Leonieke C., et al. "Healthcare professionals' regard towards working with

patients with substance use disorders: Comparison of Primary Care, General Psychiatry and Specialist Addiction Services." Drug and Alcohol Dependence, vol. 134, 2014, pp. 92–

98, <https://doi.org/10.1016/j.drugalcdep.2013.09.012>.