

SESSION ID: 3151.0

# RETHINKING EMERGENCY CARE

## “Data Mining-Based Clinical Profiles of Substance Use Related Emergency Department Utilizers”

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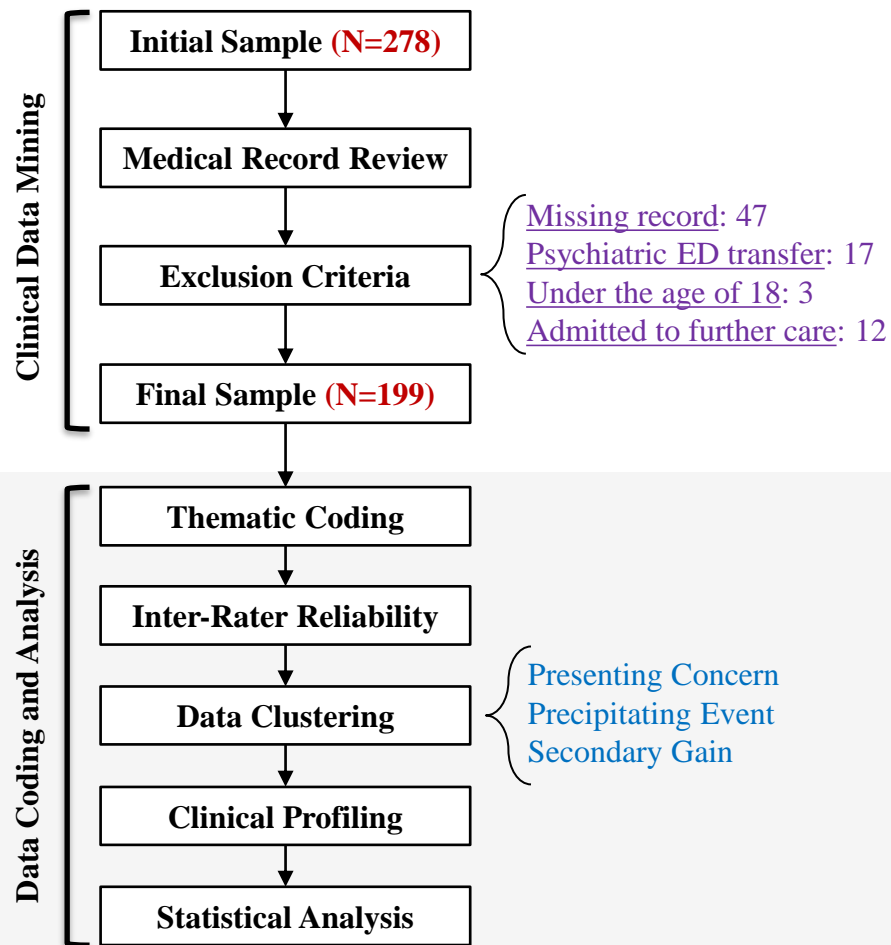


## BACKGROUND

- Substance-use is among the most common presenting condition to the emergency department (ED) resulting in substantial health-system burden.
- However, an in-depth characterization of the multiple and unique clinical profiles of the substance-related ED population is lacking.

## STUDY AIM

Define and characterize the clinical profiles of patients presenting to the ED with substance use-related issue(s), who are treated and discharged without further treatment (inpatient or outpatient).



# DESCRIPTION OF SAMPLE (N=199)



## DEMOGRAPHICS



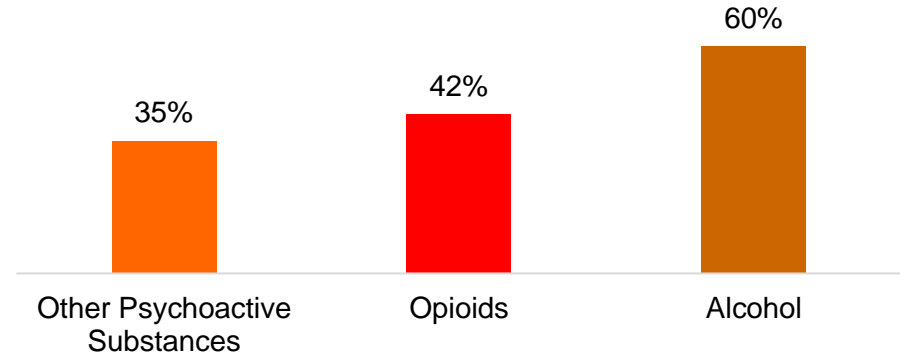
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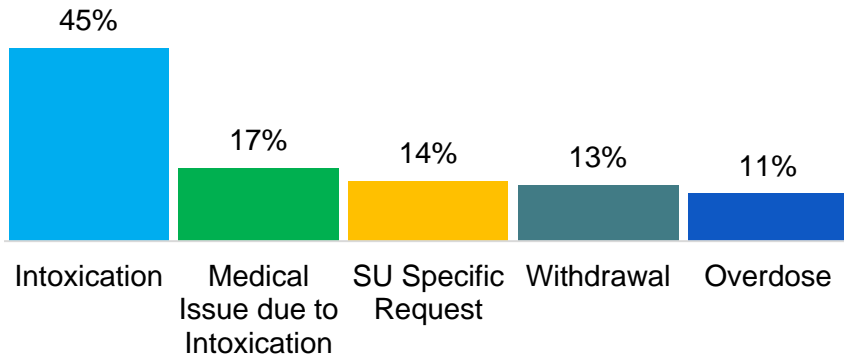
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Age Groups	Percentage
18-29	26%
30-39	26%
40-49	21%
50-59	18%
60-69	9%
70-79	1%

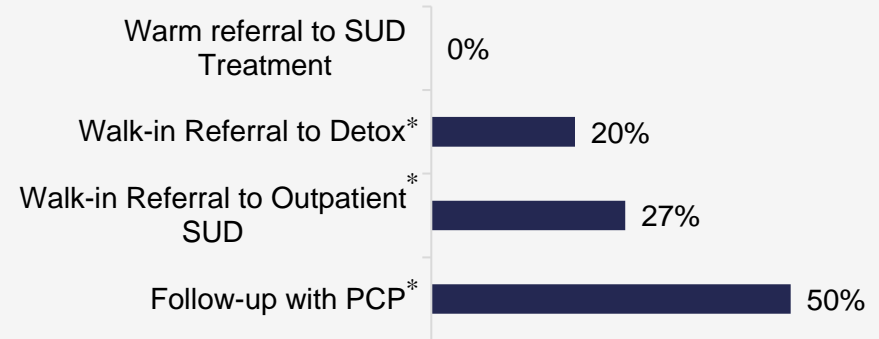
## SUBSTANCE-USE HISTORY



## CHIEF COMPLAINT



## DISCHARGE PLAN



\*No official date/time/appointment provided

# CLINICAL PROFILES



**High Utilizers:** High Utilizers, Chronically Intoxicated with Co-Morbid Medical or Behavioral Health Conditions and Complex Psychosocial Needs

**Single Episode:** Single Episodes of Care Primarily Due to Recreational Drug Use

**Service Request:** Primary Concern was Substance Use Disorder with A Verbalized Specific Request

**Altered Mental Status:** Mood Disturbances and/or Altered Mental Status Secondary to Drug Use/Intoxication

**Overdose:** Overdose with Opioids

**Withdrawal:** Acute/Active Withdrawal

Clinical Profile Characteristics							
	Total Sample	1	2	3	4	5	6
N (%)	199 (100)	71 (36.69)	40 (20.10)	28 (14.07)	27 (13.57)	18 (9.04)	15 (7.53)
<b>Precipitating Event</b>							
Intoxication	42 (21.10)	10 (14.08)	16 (40.00)	8 (28.57)	8 (29.63)	-	-
Medication Issue	13 (6.53)	3 (4.23)	1 (2.50)	6 (21.43)	-	-	3 (20.00)
Overdose	18 (9.05)	5 (7.04)	-	-	-	13 (72.22)	-
Public Intoxication	60 (30.15)	26 (36.62)	17 (42.50)	-	14 (51.85)	2 (11.11)	1 (6.67)
Substance Use	23 (11.56)	12 (16.90)	6 (15%)	1 (3.57)	2 (7.41)	2 (11.11)	-
Withdrawal	25 (12.57)	7 (9.86)	-	9 (32.14)	-	-	9 (60.00)
<b>Chief Complaint</b>							
Intoxication	90 (45.23)	35 (49.30)	30 (75.00)	-	25 (92.60)	-	-
Medical Issue due to Intoxication	33 (16.58)	16 (22.54)	10 (25.00)	3 (10.71)	2 (7.40)	-	2 (13.33)
Request – SU Specific	29 (14.57)	6 (8.45)	-	20 (71.43)	-	1 (5.56)	2 (13.33)
Withdrawal	25 (12.56)	9 (12.68)	-	5 (17.86)	-	-	11 (73.34)
Overdose	22 (11.06)	5 (7.04)	-	-	-	17 (94.44)	-
<b>Secondary Gain</b>							
Basic Needs	6 (3.02)	4 (5.63)	-	-	1 (3.70)	-	1 (6.67)
Psychiatric Evaluation	3 (1.51)	-	-	1 (3.57)	2 (7.41)	-	-
Prescription Seeking	13 (6.53)	4 (5.63)	-	7 (25.00)	-	-	2 (13.33)
Requesting Detox	38 (19.10)	9 (12.68)	3 (7.50)	18 (64.29)	3 (11.11)	-	5 (33.33)



- A mismatch between the Precipitating Event (clinician's determination) and the patient's Chief Complaint (patient's voice/presentation) may result with ineffective services and discharge plans in face of medical and psychosocial complex needs.
- Regardless of clinical needs across the various profiles, the lack of interpersonal follow-up and person-centered discharge planning left most patients walking out of the ED's doors alone.



This is a preliminary foundation to support person-centered interventions to decrease substance use-related ED utilization and to increase engagement/linkage of patients to addiction treatment.

**RETHINKING  
EMERGENCY  
CARE  
RELATED TO SUBSTANCE USE**