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## **168. Opioid Drug Concealment and Treatment Requirements in ED Patients With Confirmed Opioid Overdose**

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**Background:** Patients with intestinal concealment of opioids present diagnostic, therapeutic, ethical, and medicolegal challenges. Drug concealment continues to be a risk factor for subsequent clinical deterioration, however data to support management of fentanyl concealment is limited.

**Research Question:** We aimed to describe the treatment requirements of illicit opioid internal concealment in a robust population of ED patients with confirmed opioid overdose.

**Methods:** This is a subgroup analysis of an ongoing prospective cohort from the Toxicology Investigators Consortium Fentanyl Study Group, a study of 10 EDs across the United States. Adult patients with drug concealment as means of exposure and confirmatory opioid testing were included. Descriptive analysis of naloxone dosing and hospital length of stay was based on chart review.

**Results:** Six patients were included out of 1624 patients in the Fentanyl study (September 2020-September 2023). Out of the six patients, one received activated charcoal and four received naloxone. Of those who received naloxone, three patients received three doses and one patient received five doses followed by an infusion. The average cumulative dose of naloxone excluding infusion was 2.62 mg (range: 1.6 - 4.8 mg). The patient who was initiated on a naloxone infusion was maintained at a rate of 0.1 mg/hr for 23 hours. One patient was admitted to the intensive care unit, three were admitted to the general medicine floor, and one patient left against medical advice. The average length of stay was 40.5 hours (range 5 - 109). Of the admitted patients, all were discharged without complications.

**Conclusion:** Most patients needed multiple doses of naloxone with one requiring a naloxone infusion. The average length of stay was prolonged and demonstrated large variability. Due to small sample size and inability to distinguish between specific concealment types (i.e., drug

packers, stuffers), ongoing research is needed to better characterize and stratify this patient population.