

The Power of Primary Care

A simple story can often make a point better than discussion or debate. We've read a great deal recently about dysfunction in health care. This was true long before Covid but is more and more evident as our resources are stretched by the pandemic. Strengthening primary care in Vermont is pivotal to addressing that dysfunction. This is not a new idea. There has been widespread agreement for years that healthcare systems that are built on a foundation of primary care produce outcomes that are higher quality, more accessible and less costly than our current fragmented system. In fact, this year, the Vermont Medical Society identified strengthening primary care as a key policy priority for 2022. I'd like to offer a simple story to illustrate the power and promise of primary care.

Our practice, Little Rivers Healthcare, lies in northeastern Vermont serving a cluster of remote towns that exemplify the Vermont adage that "you can't get there from here." These are small, economically stressed towns that have been hit hard by the opiate crisis. People from more populated areas might be surprised at the scope of healthcare that is offered at Little Rivers: complete health care from birth to geriatrics, including complex chronic medical problems and mental health. You can get your prenatal care here and have your delivery with your family doctor. Skin biopsies, ultrasounds, joint injections, and substance abuse treatment are all part of our usual office days. My husband even had his chainsaw injury stitched up here last summer.

Last year, a young man I'll call Nate was found unconscious and taken by friends to a nearby hospital, having overdosed on opiates. He was revived with two doses of Narcan and was discharged. I don't know for certain if he was offered any resources for treating substance abuse, but there is no mention of it in his ER note. Almost immediately, his two friends thought he still wasn't acting right, but he wouldn't go back to the hospital. One of the friends was enrolled in Little Rivers' MAT program (Medication Assisted Therapy, an approach for treating opiate abuse) and so they brought him to us.

Normally new patients have to fill out paperwork and get records from prior providers before being offered an appointment. However, our receptionist recognized that Nate looked poorly, and he was seen immediately. He was disoriented and lethargic. A MAT nurse sat with him to monitor his vital signs to see if he needed more Narcan. While talking with her, Nate admitted that he'd intentionally taken much more than his usual amount of opiates, hoping he would die. The behavioral health counselor from our MAT team was able to see him immediately. He was monitored over the next several hours in our office until his condition stabilized. He was enrolled in our MAT program that day and started on Suboxone the next.

Nate has continued in our program and is doing well. Through Little Rivers, he sees a psychiatric nurse practitioner, a behavioral health counselor, a licensed drug and alcohol counselor and a family doctor. More recently, MAT support groups have resumed. These include Accuwellness (an acupuncture technique) and Tai Chi for people in recovery. He got his diagnosis of bipolar disorder here and has begun treatment. All of this is within walking distance of his home. Nate's been back at work for months now, and recently passed his commercial driver's test.

This young man, actively overdosing and actively suicidal, got emergent medical and mental health services and immediate follow up care in our office on a walk-in basis. No emergency room or specialist could have provided that for him. He came to us because his friend knew and trusted the providers in our MAT program. This is the power of comprehensive primary care that's integrated into the community.

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Little Rivers Healthcare

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