Understanding prescribing practices and the factors that influence decision making by health care professionals when prescribing opioids for patients with acute pain.

Alison Blackburn
Julia Blagburn
Ruth McGovern
Gemma Donovan
Alison.blackburn1 @nhs.net

Background

- Largest no. of prescriptions for opioid per patient is in the NE

- 'Pain Divide'

- Opioids for severe pain during an acute episode are fundamental

- Little known about prescribing patterns of opioids, or how decisions are made regarding opioid therapy for acute pain.

- Guidelines are available for the use of opioids in the UK, but have limited impact on the increasing use of long term opioids. The Royal College of Anaesthetists has produced national opioid awareness guidance for clinicians and patients (RCoA 2017). There are no specific local guidelines on managing an episode of pain within a hospital setting that provide advice and support on medication, duration, treatment goals and patient involvement.

- Attitudes, beliefs, practices & systems may inadvertently facilitate and maintain the use of opioids

- Project will collect evidence to aid the development of a management strategy to optimise opioid use acutely, minimise long term use aligned to risk stratification

Aims

- To explore prescription patterns of opioids in the UK, and specifically NENC.

- To review the evidence of risk stratification strategies and opioid prescription tools in relation to acute pain

- To identify what factors are involved in the decision to prescribe opioids

- To explore what information is given to patients before starting opioids and what factors are involved in the decision by patients to take opioids

Project

Workstream 1

To understand why opioids are prescribed and used from both HCP & patient perspectives.

To identify the factors involved in the decision making process.

To describe the current pathway of care when opioids are prescribed.

➢ Theoretical Domain Framework

➢ Qualitative interviews

Workstream 2

Is it possible to stratify the risk of patients becoming long term or high dose opioid users when they present with acute pain?

To understand if potentially high risk patients could be identified.

➢ Evidence synthesis of opioid risk stratification and assessment tools. (Prospero registered)

Workstream 3

To explore prescription patterns and the use of opioids in acute pain locally, regionally & nationally.

To investigate which opioids are routinely utilised.

➢ Review opioid data on local, national & public databases

Planned deliverables/outcomes

- Improved understanding of the current pathways and practices surrounding acute opioid prescription and what supports / influences this

  ➤ Support the immediate review of local guidelines on opioid use and acute pain

  ➤ Raise awareness of prescribers to the challenges & pitfalls, & to reflect on their prescribing practice

  ➤ Establish regional links & networks that integrate primary & secondary care practices

  ➤ Communicate with national bodies to support the renewal of guidelines on the use of opioids for acute pain

- Submit funding application to develop & evaluate an acute pain opioid management guideline

- Disseminate to regional & national pain fora