

Creating Healthy Work Environments VIRTUAL 2021

Pain Management Bias in African Americans With Sickle Cell Disease

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Purpose:

The purpose of this literature review was to determine how implicit bias impacts patients who suffer from sickle cell disease (SCD). Sickle cell disease is an inherited disorder that distorts the shape of hemoglobin and red blood cells, causing vaso-occlusive episodes that lead to profound ischemic pain, often resulting in hospitalization for pain management (Matthie & Jenerette, 2015). According to the Centers for Disease Control (2018), SCD primarily affects African Americans, with one in every 13 being a carrier for the trait and one in every 365 live births having SCD. African Americans and other minorities often suffer from health disparities related to race, socioeconomic status, and medical condition. Research shows that African Americans' pain is more likely to be underestimated and undertreated compared to their Caucasian counterparts (Hoffman et al., 2016).

Methods:

This review aimed to identify factors that contribute to the bias in the pain management of African Americans with SCD. A literature review was conducted utilizing CINAHL and PubMed databases. The inclusion criteria were articles published between 2015 and 2020, discussed biases related to pain management and sickle cell disease, and were written in English.

Results:

A review of the literature revealed that factors such as longer wait times, escalation to pseudo-addiction, healthcare provider perception, and lack of knowledge could play a role in pain management bias in African Americans with SCD. Patients with SCD experience longer wait times in emergency departments compared to the general population. Wait times were longer for Blacks, younger patients, women, and those who frequently utilized the emergency department. Patients with SCD may be judged to be of lower acuity than others with similar pain (Pulte et al., 2016). Those that suffer from SCD can experience acute and chronic pain that is not always adequately treated. As a result, the patient's response to under treatment, such as moaning, grimacing, or crying is marginalized as evidence of drug addiction. African Americans with SCD often suffer from inadequate pain control and thus resort to behaviors resembling pseudo-addiction, further perpetuating the stigma of the patients with SCD (Kotila et al., 2015). The healthcare provider's perception can also be a barrier to adequate pain management in patients with SCD. It is not uncommon to hear healthcare providers use language such as "frequent flyers" and "sickler" to describe patients with SCD. Up to 41% of healthcare providers surveyed reported concerns that patients with SCD may be drug-seeking, and that perception influenced the care they provided (Masese et al., 2019).

Conclusion:

There is mounting evidence of racial disparities related to healthcare provider implicit and explicit bias towards African Americans with painful conditions such as SCD. Minority nurses caring for AA patients with SCD may experience moral distress associated with marginalization of this population. Clinicians should increase their understanding of SCD and consider their own bias when caring for them. Future research should focus on assessing the stigma associated with

this specific population. Currently, there is no validated measure to assess stigma towards patients with SCD who present to the emergency department.

Title:

Pain Management Bias in African Americans With Sickle Cell Disease

Keywords:

Implicit bias, Pain management and Race

Abstract Summary:

Racial bias in pain management of African Americans (AA) contributes to the health disparities related to race and socioeconomics. Patients affected by sickle cell disease (SCD) frequently do not receive adequate pain management. Clinicians should consider if implicit/direct bias negatively impacts treatment plans while increasing their understanding of SCD.

Late Breaking Reason:

Due to the recent events surrounding the death of George Floyd, evidence of systemic racism has become a matter of national attention. Racial inequities are prevalent in healthcare and have profound effects on minority patient outcomes and may lead to moral distress among minority nurses caring for patients with SCD.

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