Title:
Long-Term Opiate Cessation: The Nurse's Role as Patient Advocate

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References:
Manworren, R. C. (2015, August). Nurses' Role in Preventing Prescription Opioid Diversion: Practical steps can help reverse this public health crisis. AJN, American Journal of Nursing, 115(8), 34-40. doi:10.1097/01.naj.0000470399.51553.03

Abstract Summary:  
Opiate abuse is a growing epidemic affecting men and women of all ages and races. Nurses should be prepared to apply the nursing process to promote long-term opioid cessation. This presentation will provide a description of common barriers and suggestions for nursing interventions.

Learning Activity:

<table>
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<tr>
<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<tr>
<td>Identify three common barriers to adherence that patients face while seeking long-term cessation treatment.</td>
<td>Review of the literature will provide the audience with current analysis of barriers faced by patients in long-term opioid cessation.</td>
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<td>Apply the nursing process to address patient-specific barriers to treatment adherence.</td>
<td>Description of points at which nurses can intervene to promote success with long-term opioid cessation, through the steps in the nursing process.</td>
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Abstract Text:
Opioid addiction is a national epidemic with overdoses accounting for more than 28,000 deaths among young adults each year. In 2011 alone, over 488,000 ED visits were the result of opioid analgesic use. Many of these deaths can be prevented with medication therapy cessation programs and psychological interventions. The purpose of this project was to identify common barriers found in patients seeking opiate cessation and the nurse's role in helping to assist with the recovery efforts. A literature review was performed searching PubMed, CINAHL, and MEDLINE databases using key words: 'addict*', 'medication*', 'nursing', 'barriers*' and 'cessation'. A total of 15 articles from this search were included in this review. The results of this literature review suggest three main opportunities for nurses to utilize their nurse-patient relationship to improve patient success in long-term opioid cessation.
The ability of nurses to connect with patients is deeper and more intimate than most other professions. Nurses can utilize this nurse-patient relationship to build trust and a working relationship in overcoming obstacles many patients face when beginning their journey to long-term cessation. Success with long-term opioid cessation can be increased through early identification of multiple barriers faced by patients through application of the nursing process.

Detailed nursing assessments are the first step in addressing these barriers and promoting success in long-term cessation. Utilizing the nursing process to establish patient goals and outcomes can help the nurse identify a patient’s specific needs. Some of the most common barriers faced by patients include lack of self-efficacy, knowledge deficit with regard to long-term cessation medications and programs, and access to specialized clinics.

During the initial assessment, nurses can identify patients’ behaviors and thoughts about addiction and recovery. Studies have shown promising results in the use of patient specific treatment activities that promote self-efficacy. Such activities include: motivational interviewing, a patient specific, goal-directed form of interviewing meant to engage the patient and encourage positive behaviors.

Four out of five new heroin abusers began by abusing prescription pain medication either prescribed to them or diverted from someone else. Diversion, the distribution of prescription medications to those without a prescription, is one of the leading causes of opiate misuse ultimately leading to addiction. When opiates are diverted to non-prescribed parties there is no education provided on the risks of opiate abuse or even instructions on proper dosing. Most importantly, it was not by a prescribing physician. Medications such as opiates should only be given by a prescribed physician who can fully assess and treat a patient’s condition accordingly. Educational barriers include lack of knowledge and understanding the implications of such practices such as sharing medications or taking more than prescribed dose can lead to opiate addiction. Thus, nurses should educate patients by fully explaining the negative consequence of opiate diversion, evaluating patients’ understanding of the teaching, and emphasizing the importance of not sharing prescription opiates.