

Fighting prescription painkiller abuse among baby boomers

December 7 2015, by Marcene Robinson



Yu-Ping Chang, Ph.D., RN. Credit: Douglas Levere

Prescription opioid abuse has reached epidemic proportions, with more than half of patients being treated for chronic pain reportedly misusing their medication at some point.

However, new research led by University at Buffalo psychiatric nursing researcher Yu-Ping Chang found [motivational interviewing](#), a form of behavioral counseling, is an effective tool at curbing the abuse.

Prescription opioids - which includes pain medications such as morphine, Lortab and codeine - are abused by 1.9 million Americans and cause nearly two deaths every hour from overdose or respiratory

depression. Nearly 75 percent of opioid addiction patients switch to heroin as a cheaper source of the drug, according to data from the American Society of Addiction Medicine (ASAM).

"Older adults are at high risk for complications resulting from prescription [opioid misuse](#)," says Chang, PhD, RN, associate professor and interim associate dean for research and scholarship in the UB School of Nursing.

"As the baby boomer generation ages and more patients are prescribed opioids, abuse is likely to become an even greater problem."

The study, "The Effect of Motivational Interviewing on Prescription Opioid Adherence Among Older Adults With Chronic Pain," was published in a recent issue of *Perspectives in Psychiatric Care*.

Motivational interviewing (MI) is designed to promote a patient's desire to change problem behaviors by expressing empathy for their experiences, using non-confrontational dialogue, and developing discrepancies between actual and desired behavior.

Although MI was developed to treat alcohol abuse, researchers wondered if the intervention also could be effective in treating opioid misuse in [older adults](#).

The researchers examined patients 50 years of age and older who experienced [chronic pain](#) and were rated at risk for opioid misuse based on screening tools. The participants underwent MI for one month, which consisted of an in-person meeting followed by weekly phone sessions with counselors, and later received a one month follow-up test.

Before and after the intervention, participants completed screening surveys for risk of opioid misuse, alcohol abuse, levels of motivation,

self-efficacy, depression and anxiety, chronic pain intensity and treatment satisfaction.

In addition to reducing the risk for opioid misuse, participants reported an increase in confidence, self-efficacy and motivation to change behavior, and a decline in depression, anxiety and the intensity of chronic pain.

The success of the low-cost intervention is a positive sign in the battle against prescription opioid abuse in primary care, says Chang.

Opioids are one of the most commonly prescribed medications used to treat individuals with chronic pain, an issue that affects nearly half of Americans at some point in their lives, she says. According to the ASAM, in 2012 some 259 million opioid pain medication prescriptions were written, enough for every adult in the U.S. to have a bottle of pills.

"Primary care providers who prescribe opioids to their patients with chronic pain are in the unique position to identify and intervene with patients whose use is hazardous or harmful to their health," says Chang. "With motivational interviewing techniques, a brief and practical behavioral intervention, they can reduce the risk of opioid misuse and abuse."

Risk factors that could lead to opioid abuse include social isolation, poor health, multiple chronic illnesses, mental illness and prior or current substance abuse. Health care providers should assess these factors when treating [chronic pain patients](#), says Chang.

Future research will explore the long-term effects of motivational interviewing, and incorporate additional patient testing measures, such as pill counts, refill records and urine drug tests, says Chang.

Provided by University at Buffalo

Citation: Fighting prescription painkiller abuse among baby boomers (2015, December 7)
retrieved 5 May 2024 from

<https://medicalxpress.com/news/2015-12-prescription-painkiller-abuse-baby-boomers.html>

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