EXPLORING THE ROLE OF NURSES IN MANAGEMENT OF OPIOID CRISIS

Najla Rizq Saad Kaabi¹*, Maryam Mousa Ali Akkam², Alaa Abduh Alakhrash³, Seham Mohammed A Zaeri⁴, Haifa Ahmed Salami⁵, Sabirin Salem Saad Alsulobi⁶, Aljohirha Mohammed Alotibia⁷, Khalid Awad Salem Al-Thabiti⁸

Abstract:

The opioid crisis has emerged as a significant public health concern, causing profound harm to individuals, families, and communities. Originating in the late 1990s due to aggressive marketing of prescription opioids, this crisis has resulted in a dramatic increase in opioid-related fatalities and overdoses across the United States. Its impact extends to social, economic, and public health domains, placing immense pressure on healthcare systems, law enforcement, and social services. Strategies to address the crisis have included enhancing access to evidence-based treatments, distributing naloxone, and promoting safer prescribing practices. This research article aims to delve into the current involvement of nurses in confronting the opioid crisis, identifying the challenges they encounter, assessing the effectiveness of their interventions, and examining the crisis's impact on nurses' professional practice and well-being. It is evident that nurses play a pivotal role in opioid education, prevention, addiction treatment, and recovery. Their responsibilities encompass providing accurate information to patients, conducting risk assessments, formulating comprehensive pain management plans, and advocating for policy reforms. The collaboration between nurses and other healthcare professionals is crucial in managing the complexities of the crisis and ensuring holistic patient care. Despite obstacles such as stigma and limited resources, nurses have promising opportunities to contribute to addressing the crisis and enhancing the health and well-being of individuals and communities affected by opioid addiction. Ongoing research, advocacy efforts, and collaborative initiatives are imperative in devising effective solutions to combat the opioid crisis and foster healthier, more resilient communities.

Keywords: Opioid Misuse, Research, Policy, Education, Nursing, Clinical Practice, Overdose.

*Corresponding Author: Najla Rizq Saad Kaabi

DOI: 10.53555/ecb/2022.11.10.207

¹*Nursing specialist, Eastern Laban primary health care centre, Riyadh, Saudi Arabia.

²Nurse, Prince Mohammed bin Saud Al-Kabeer Health Center, Al-Raed District, Saudi Arabia.

³Nurse, Eastern Laban primary health care centre, Riyadh, Saudi Arabia.

⁴Nurse, Asir Health Center, Riyadh, Saudi Arabia.

⁵Nursing technician, Women, Maternity and Children's Hospital in Al Kharj, Saudi Arabia.

⁶Midwife, Maternity and Children's Hospital, Arar, Saudi Arabia.

⁷Nurse, Uraija AlWusta Health center, Riyadh, Saudi Arabia.

⁸Nursing specialist, Taif Children Hospital, Taif, Saudi Arabia

^{*}Nursing specialist, Eastern Laban primary health care centre, Riyadh, Saudi Arabia.

Introduction:

The complexity of the opioid crisis as a pressing public health issue has garnered significant attention due to its detrimental impact on individuals, families, and communities, both domestically and globally [1]. Opioids, a class of medications comprising prescription pain relievers like oxycodone, hydrocodone, and morphine, alongside the illicit drug heroin, possess the capacity to effectively manage pain when administered appropriately under medical supervision. However, they also carry a substantial risk of misuse, dependence, and addiction [1].

The genesis of the opioid crisis can be traced back to the late 1990s, characterized by the aggressive promotion of prescription opioids by pharmaceutical companies as safe and effective remedies for chronic pain. This marketing blitz led to a dramatic escalation in opioid prescriptions, subsequently resulting in a surge in opioid-related deaths and overdoses. Alarmingly, data from the Centers for Disease Control and Prevention (CDC) indicates that more than 750,000 individuals have died from opioid overdoses in the United States since 1999 [2].

The ramifications of the opioid crisis span across social, economic, and public health spheres. Individuals who misuse opioids are at heightened risk of developing substance use disorders, experiencing overdoses, and contracting infectious diseases like HIV and hepatitis C. Apart from the human toll, the crisis has placed significant strain on healthcare systems, law enforcement agencies, and social services. The economic impact of the crisis is staggering, with estimates suggesting billions of dollars lost in productivity, healthcare costs, and criminal justice expenditures [3].

Numerous strategies have been deployed to address the opioid crisis, including improving access to evidence-based treatments for opioid use disorder, expanding the distribution of naloxone to prevent overdoses, implementing prescription drug monitoring programs to monitor prescriptions, and promoting safer prescribing practices among healthcare providers [4]. In recent years, there has been a growing recognition of the need for a holistic, multi-faceted approach to combatting the opioid crisis, encompassing prevention, treatment, harm reduction, and recovery support services. This approach entails increasing the availability of medication-assisted like treatments (MAT) methadone buprenorphine, widening access to mental health and social services, and tackling the social determinants of health that contribute to substance use disorders, such as poverty, trauma, and inadequate healthcare access [5].

Despite these collective endeavors, the opioid crisis remains a formidable challenge to public health and safety. There is an urgent call for sustained research, advocacy, and collaboration among policymakers, healthcare professionals, community organizations, and individuals with lived experiences to develop and implement effective solutions to this intricate issue. By coming together to address the underlying causes of the opioid crisis and providing support and resources to those affected by it, we can instigate positive change and foster healthier, more resilient communities for all [6].

Objectives:

The main objectives of this review are:

- 1. To examine the current role of nurses in addressing the opioid crisis.
- 2. To identify the challenges faced by nurses in addressing the opioid crisis.
- 3. To evaluate the effectiveness of interventions implemented by nurses in addressing the opioid crisis.
- 4. To investigate the impact of the opioid crisis on nurses' professional practice and well-being.

Nurses' role in opioid education and prevention:

Nurses play a crucial role in opioid education and prevention due to their frontline position in healthcare, allowing for frequent and direct patient interactions. The global impact of the opioid epidemic underscores the importance of nurses providing accurate information on opioids, potential side effects, addiction risks, and non-pharmacological pain management options to patients. Through patient education on proper opioid use, adherence to prescribed dosages, and identification of addiction signs, nurses can help prevent misuse and promote safe medication practices [7].

Furthermore, nurses can contribute to opioid prevention by screening for risk factors such as substance abuse history, mental health disorders, and chronic pain conditions. Early identification of individuals at higher risk for opioid addiction enables nurses to offer targeted education and support to mitigate these risks. Collaborating with other healthcare professionals, nurses can develop comprehensive pain management plans that prioritize non-opioid treatments to reduce the likelihood of opioid dependence and addiction [8].

In addition to patient education and risk assessment, nurses can advocate for policy changes and initiatives to address the opioid epidemic at a systemic level. By participating in public health campaigns, advocating for improved access to addiction treatment services, and supporting legislation promoting safe prescribing practices, nurses can help shape the healthcare landscape to prevent opioid misuse and addiction. Community outreach efforts by nurses can raise awareness about opioid dangers, provide addiction treatment resources, and support harm reduction strategies to minimize the negative impact of opioid use on individuals and communities [9].

In conclusion, nurses' multifaceted role in opioid education and prevention is crucial in combating the epidemic. Their expertise, compassion, and advocacy can significantly contribute to promoting safe medication practices, preventing opioid misuse, and supporting individuals affected by addiction. Leveraging their unique position in the healthcare system, nurses can play a vital role in addressing the challenges posed by opioid use and addiction, ultimately improving the health and well-being of patients and communities [10].

The impact of nurses in opioid addiction treatment and recovery:

Nurses play an essential role in providing care and support to individuals struggling with opioid dependence [11]. Positioned at the forefront of healthcare delivery, nurses serve as the primary point of contact for patients seeking help with their addiction challenges. Their responsibilities include initial assessments, conducting developing treatment plans, and offering ongoing care and motivation throughout the recovery process. Nurses have a unique ability to build trusting relationships with patients, which is crucial for addressing the complex physical, psychological, and social factors contributing to opioid addiction. With their expertise in pharmacology and patient education, nurses play a key role in managing medications and implementing harm reduction strategies to support safe opioid tapering and reduce the risk of overdose [12].

In addition to their clinical roles, nurses act as advocates for patients within the healthcare system, ensuring that individuals receive comprehensive and compassionate care free from bias [13]. By collaborating with multidisciplinary teams that may include physicians, social workers, psychologists, and addiction counselors, nurses help develop tailored treatment plans to meet the diverse needs of patients in recovery. They provide

valuable education and support to patients and their families, empowering them to make informed decisions about their care and navigate the challenges of addiction recovery.

Furthermore, nurses lead efforts to implement practices innovative evidence-based and interventions to improve outcomes for individuals affected by opioid addiction [14]. They stay informed about the latest research and best practices in addiction treatment, continuously seeking opportunities for professional development to enhance their skills and knowledge. Nurses also engage in community outreach and educational initiatives to raise awareness about opioid addiction, reduce stigma, and promote access to treatment and support services. By collaborating with local organizations, educational institutions, and policymakers, nurses advocate for policies and programs that prioritize prevention, intervention, and long-term support for individuals impacted by opioid addiction.

Moreover, nurses play a crucial role in addressing the opioid crisis at a population level through public health campaigns and advocacy efforts [15]. They work with government agencies, non-profit organizations, and community stakeholders to develop and implement strategies to prevent opioid abuse, expand access to treatment, and reduce overdose deaths. Nurses actively participate in harm reduction programs such as needle exchange services and naloxone distribution to prevent the spread of infectious diseases and save lives in overdose situations. Additionally, they contribute to research projects and quality improvement initiatives to evaluate the effectiveness of interventions and shape best practices in opioid addiction treatment and recovery.

Collaboration between nurses and healthcare providers in opioid crisis management:

In the midst of the persistent opioid crisis, the synergy between nurses and healthcare professionals plays a pivotal role in effectively tackling this complex issue. Nurses, positioned at the forefront of patient care, often serve as the initial point of contact for individuals seeking assistance with opioid-related issues. strategic placement allows them to assess, monitor, and provide crucial support to those struggling with opioid use disorder. By closely collaborating with physicians, pharmacists, social workers, and other healthcare professionals, nurses can ensure a comprehensive and holistic approach to addressing the opioid crisis [16].

A key component of this collaboration involves the exchange of information and expertise between nurses and other healthcare providers. Nurses excel in conducting thorough assessments, identifying early signs of opioid misuse, and implementing evidence-based interventions to address patients' needs. Through collaboration with physicians, nurses can ensure that patients receive appropriate medical care, including medication-assisted therapies, pain management strategies, and referrals to specialized addiction treatment programs [17].

Furthermore, collaboration enables a coordinated care approach that considers the physical, psychological, and social aspects of opioid use disorder. Nurses can work with social workers to connect patients with community resources such as support groups, counseling services, and housing assistance, which can support long-term recovery. By collaborating with pharmacists, nurses can also ensure the safe and effective management of medications, including monitoring for potential drug interactions, adverse effects, and signs of opioid diversion [18].

In addition to providing direct patient care, collaboration between nurses and healthcare providers in addressing the opioid crisis extends to advocacy and policy development. Nurses can leverage their expertise and firsthand experience to advocate for changes in healthcare policies, regulations, and practices that promote harm reduction, treatment accessibility, and prevention efforts [19]. Through partnerships policymakers, healthcare administrators, and community stakeholders, nurses can contribute to the development of comprehensive strategies to combat the opioid crisis at various levels – local, regional, and national.

Moreover, collaboration between nurses and healthcare providers in opioid crisis management is essential for fostering a culture of interprofessional teamwork and mutual respect. By recognizing and valuing each team member's unique contributions, nurses and providers can collaborate more effectively to achieve common goals and improve outcomes. Through ongoing patient communication, education, and training initiatives, and providers can enhance collaborative skills, build trust and rapport, and ultimately deliver high-quality, patient-centered care to individuals affected by opioid use disorder [20].

Challenges and opportunities for nurses in addressing the opioid crisis:

Nurses play a pivotal role in addressing the opioid epidemic, facing a multitude of obstacles and promising prospects in their efforts to combat this prevalent public health issue. The opioid crisis, characterized by the widespread misuse and dependence on opioid medications, presents a complex challenge for nurses across various healthcare settings. One of the primary hurdles they encounter is the sheer magnitude of the crisis, leading to a surge in opioid-related hospitalizations, overdoses, and fatalities, thereby straining healthcare systems and necessitating comprehensive response from nurses [21].

Furthermore, nurses must navigate the intricate dynamics of opioid addiction, often intertwined with other mental health conditions and chronic illnesses, requiring a holistic and integrated approach to care. They also contend with the stigma and misconceptions surrounding opioid addiction, which can hinder effective treatment and support for individuals affected by this issue. The opioid crisis has exacerbated healthcare resource constraints and exacerbated workforce shortages, further burdening nurses who already face heavy workloads and limited resources [22].

Despite these formidable challenges, nurses have a significant opportunity to make a difference in addressing the opioid crisis through various avenues. Firstly, their frontline position enables them to provide compassionate and evidence-based care to individuals struggling with opioid addiction, addressing their physical, psychological, and social needs. Nurses can leverage their expertise in patient education and advocacy to raise awareness about the risks of opioid misuse, promote safe medication practices, and empower individuals to seek help for substance use disorders.

Moreover, nurses can play a vital role in developing and implementing comprehensive opioid management programs within healthcare facilities, incorporating best practices in pain management, addiction treatment, and harm reduction strategies [23]. They can collaborate with interdisciplinary teams to advocate for policy changes and resources that prioritize prevention, treatment, and recovery support for those impacted by the opioid crisis. Additionally, nurses can engage in research and quality improvement initiatives to enhance understanding of opioid addiction and improve the effectiveness of interventions and care delivery models.

Furthermore, nurses can help reduce the stigma associated with opioid addiction and advocate for a compassionate and nonjudgmental approach to caring for individuals with substance use disorders [24]. Community outreach and educational efforts led by nurses can address the social determinants of opioid addiction, such as poverty, trauma, and limited access to healthcare services, contributing to a more holistic and equitable response to the crisis. Nurses also have the potential to influence public policy and advocate for systemic changes that prioritize prevention, early intervention, and evidence-based treatment for opioid addiction.

In conclusion, while nurses face significant challenges in tackling the opioid crisis, they also have numerous opportunities to make a meaningful impact through their expertise, compassion, and advocacy. By leveraging their unique position within the healthcare system, nurses can contribute to a comprehensive and compassionate response to the opioid crisis, ultimately improving the well-being of individuals and communities affected by this pervasive public health challenge [25].

Conclusion:

In summary, the opioid crisis continues to present a significant public health challenge, causing devastating impacts on individuals, families, and communities. Efforts to combat this crisis have involved a comprehensive approach that includes prevention, treatment, harm reduction, recovery support services. Nurses play a vital role in addressing the opioid epidemic through their involvement in education, prevention, treatment, and advocacy efforts. Utilizing their unique position within the healthcare system, nurses can have a substantial influence in promoting safe medication practices, providing assistance to those struggling with addiction, and advocating for policy changes to address the underlying issues of the crisis. Collaboration between nurses and other healthcare professionals is crucial in effectively managing the complexities of opioid crisis management and ensuring comprehensive care for patients. Despite obstacles such as stigma, limited resources, and workforce shortages, nurses have promising opportunities to contribute to the collective efforts in addressing the opioid crisis and enhancing the health and well-being of individuals and communities impacted by opioid addiction. Continued research, advocacy, and collaboration are essential in developing successful solutions to this intricate problem and establishing healthier, more resilient communities for all.

References:

- American Association of Colleges of Nursing. (2019). Opioid epidemic resources for nurse educators. Retrieved December 17, 2020, from https://www.aacnnursing.org/Policy-Advocacy/Opioids
- 2. American Nurses Association. (2018). The ethical responsibility to manage pain and the suffering it causes. Retrieved from https://www.nursingworld.org/~495e9b/global assets/docs/ana/ethics/theethicalresponsibilityt omanagepainandthesufferingitcauses2018.pdf
- 3. Andrews-Cooper IN, & Kozachik SL (2020). How patient education influences utilization of nonpharmacological modalities for persistent pain management: An integrative review. Pain Management Nursing, 21(2), 157–164. [PubMed] [Google Scholar]
- 4. Arksey H, & O'Malley L (2005). Scoping studies: Towards a methodological framework. International Journal of Social Research Methodology, 8(1), 19–32. [Google Scholar]
- 5. Arnstein P, St. Marie B, & Zimmer PA (2018). Managing chronic pain with opioids: A call for change. Journal for Nurse Practitioners 14(1), 40–44. [Google Scholar]
- 6. Barnes H, Richards MR, McHugh MD, & Martsolf G (2018). Rural and nonrural primary care physicia practices increasingly rely on nurse practioners. Health Aff (Millwood), 37(6), 908–914. [PMC free article] [PubMed] [Google Scholar]
- 7. Becze E (2018). Despite regulations, patients with cancer pain still need safe access to opioids. ONS Voice, 33(2), 32 Retrieved from https://voice.ons.org/news-and-views/despite-regulations-patients-with-cancer-pain-still-need-safe-access-to-opioids [Google Scholar]
- 8. Belcher AM, Cole TO, Greenblatt AD, Hoag SW, Epstein DH, Wagner M, ... Colloca L (2019). Open-label dose-extending placebos for opioid use disorder: A protocol for a randomised controlled clinical trial with methadone treatment. BMJ Open, 9(6). E026604. [PMC free article] [PubMed] [Google Scholar]
- 9. Bernhofer EI, & Sorrell JM (2015). Nurses managing patients' pain may experience moral distress. Clinical Nursing Research, 24(4), 401–414. [PubMed] [Google Scholar]
- 10. Carlson C, Wise M, & Gilson AM (2020). State boards of nursing guidance to mitigate prescription opioid misuse and diversion. Pain Management Nursing, 21(1), 81–89. [PubMed] [Google Scholar]
- 11. Case A, & Deaton A (2017). Mortality and morbidity in the 21st century. Brookings Papers on Economic Activity, 2017(Spring), 397–476.

- 10.1353/eca.2017.0005 [PMC free article] [PubMed] [CrossRef] [Google Scholar]
- 12.Ceasar R, Chang J, Zamora K, Hurstak E, Kushel M, Miaskowski C, & Knight K (2016). Primary care providers' experiences with urine toxicology tests to manage prescription opioid misuse and substance use among chronic noncancer pain patients in safety net healthcare settings. Substance Abuse, 37(1), 154–160. [PMC free article] [PubMed] [Google Scholar]
- 13.Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Unintentional Injury Prevention. (2018). Quality improvement and care coordination: Implementing the CDC guideline for prescribing opioids for chronic pain. Atlanta, GA: Retrieved October 5, 2020 from
 - https://www.cdc.gov/drugoverdose/pdf/prescribing/CDC-DUIP-
 - QualityImprovementAndCareCoordination-508.pdf [Google Scholar]
- 14.Centers For Disease Control and Prevention. (2020). Opioid overdose. Retrieved October 5, 2020 from https://www.cdc.gov/drugoverdose/epidemic/in dex.html
- 15.Centers for Disease Control and Prevention. (2020). Opioid overdose: Overview. Retrieved October 5, 2020 from https://www.cdc.gov/drugoverdose/data/prescri bing/overview.html
- 16.Centers for Disease Control and Prevention. (2020). Opioid overdose: Prescribing practices. Retrieved October 5, 2020 from https://www.cdc.gov/drugoverdose/data/prescribing/prescribing-practices.html
- 17. Chang JS, Kushel M, Miaskowski C, Ceasar R, Zamora K, Hurstak E, & Knight KR (2017). Provider experiences with the identification, management, and treatment of co-occurring chronic non-cancer pain and substance use in the safety net. Substance Use & Misuse, 52(2), 251–255. [PMC free article] [PubMed] [Google Scholar]
- 18. Chang YP (2018). Factors associated with prescription opioid misuse in adults aged 50 or older. Nursing Outlook, 66(2), 112–120. [PMC free article] [PubMed] [Google Scholar]
- 19.Chang YP, & Compton P (2016). Opioid misuse/abuse and quality persistent pain management in older adults. Journal of Gerontological Nursing, 42(12), 21–30. [PubMed] [Google Scholar]
- 20. Chang, Yu Ping, Cassalia J, Warunek M, & Scherer Y (2019). Motivational interviewing training with standardized patient simulation for

- prescription opioid abuse among older adults. Perspectives in Psychiatric Care, 55(4), 681–689. 10.1111/ppc.12402 [PubMed] [CrossRef] [Google Scholar]
- 21. Chang, Yu Ping, Compton P, Almeter P, & Fox CH (2015). The effect of motivational interviewing on prescription opioid adherence among older adults with chronic pain. Perspectives in Psychiatric Care, 51(3), 211–219. [PubMed] [Google Scholar]
- 22. Chaudhary S, & Compton P (2017). Use of risk mitigation practices by family nurse practitioners prescribing opioids for the management of chronic nonmalignant pain. Substance Abuse, 38(1), 95–104. [PubMed] [Google Scholar]
- 23.Collins FS, Koroshetz WJ, & Volkow ND (2018). Helping to End Addiction Over the Long-term: The research plan for the NIH HEAL initiative. JAMA, 320(2), 129–130. [PMC free article] [PubMed] [Google Scholar]
- 24.Compton PA, Wu SM, Schieffer B, Pham Q, & Naliboff BD (2008). Introduction of a self-report version of the prescription drug use questionnaire and relationship to medication agreement noncompliance. Journal of Pain and Symptom Management, 36(4), 383–395. [PMC free article] [PubMed] [Google Scholar]
- 25.Compton P, & Weaver MF (2015). Responsible opioid use. Journal of Pain and Palliative Care Pharmacotherapy, 29(2), 166–168. [PubMed] [Google Scholar]