

HELP-SEEKING FOR OPIOID MEDICATION-RELATED PROBLEMS AMONG A COHORT OF CHRONIC NON-CANCER PAIN PATIENTS PRESCRIBED STRONG OPIOIDS

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Introduction and Aims: Chronic non-cancer pain (CNCP) is common and burdensome. Opioids are widely used to treat chronic pain, often for long periods. CNCP patients report a range of opioid medication-related problems, including side effects, patient concerns about addiction, non-adherence (or 'aberrance') and dependence. This study examines the prevalence and correlates of help-seeking and knowledge, attitudes and barriers to treatments for opioid dependence among a sample of CNCP patients.

Design and Methods: This study draws on cross-sectional interview data from N=746 CNCP patients receiving opioid therapy. These data were collected from a subsample of the Pain and Opioids IN Treatment (POINT) study (a large national prospective cohort study of persons prescribed strong opioids for CNCP).

Results: Seventy percent of POINT participants reported their doctor discussed the risk of addiction; 30% reported an opioid treatment agreement (49% lifetime), 19% staged supply of their medication (24% lifetime) and 3% received opioids under supervised dosing conditions in the past 12 months (5% lifetime). Thirty percent were concerned about their opioid use (77% of whom had told their doctor). One in five reported seeking help, most commonly from their GP (70%), family/partner (53%) and pain clinic (48%). Reasons for help-seeking were others expressing concern (31%), health issues (26%), relationship (19%) and work difficulties (17%). Lifetime use of opioid substitution therapy was low (<5%).

Discussion and Conclusions: In the context of dramatic increases in long-term opioid prescribing for CNCP, it is important to understand patient knowledge, preferences and decisions regarding help-seeking for opioid-related problems.

Disclosure of Interest Statement:

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