

# Teaching resident physicians about safe opioid prescribing

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One in three people in the United States lives with chronic pain, and over the course of the past 20 years, more and more people have turned to opioids as a way to treat or manage that pain. Although opioids can be an effective treatment method for some patients, prescribing them comes with risk for physicians and patients alike. That is why the AMA developed an online module to teach medical and surgical residents the adverse effects of opioid therapy and risk-mitigation strategies to reduce opioid-related harm.

“Safer Prescribing and Managing of Opioids” is one of the AMA GME Competency Education Program offerings, which include nearly 30 courses that residents can access online through their institution’s subscription, on their own schedule.

Among the program’s experts are several who contributed to the AMA’s Health Systems Science textbook, which draws insights from faculty at medical schools that are part of the Association’s Accelerating Change in Medical Education consortium.

Modules cover five of the six topics—patient care, practice-based learning and improvement, interpersonal and communication skills, professionalism, and system-based practice—within the Accreditation Council for Graduate Medical Education’s core competency requirements. The sixth requirement, medical knowledge, is one that is typically addressed during clinical education.

## Pros and cons of opioids

There are two types of opioids: immediate-release opioids intended for acute pain and fast relief, and extended-release opioids meant for continuous, long-term pain relief. Both types of opioids can be used safely for most patients as they can decrease pain and improve function. The challenge is that opioids are narcotics and people react differently to them, including those who develop a tolerance or become dependent on them.

Since patient responses to opioids aren't predictable, prescribing opioids becomes even more challenging. It is important to remember that no individual is immune to addiction. However, there are risk factors that can point to opioid-use disorder. These factors include:

- | History of substance-use disorder.
- | Heavy use of alcohol, tobacco and drugs.
- | Legal problems related to substance use.
- | Mental health disorders.
- | Preadolescent sexual abuse.
- | Higher than average daily opioid use.
- | Long-term opioid therapy.

Regulations of opioids exist at the state and federal level. The AMA Opioid Task Force has also made recommendations for physicians and policymakers to help reverse the opioid epidemic. Learn more at the AMA's End the Epidemic website.

## Caring for the whole patient

Multidimensional care should be the standard for all physicians when it comes to patients and their pain. The goal is to restore function, reduce pain, improve quality of life and cultivate well-being in an effort to ultimately get patients to a place of effective self-management.

Opioids are generally prescribed only when alternative safer treatment options are inadequate, but the AMA module explains that prescribing opioids still need to be more selective and conservative. There have not been enough studies on long-term opioid therapy, and as a result there still are a lot of unknowns.

Visit the AMA GME Competency Education Program for more information on this and other offerings or to request a demo.