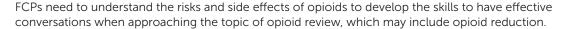


Information Fact Sheet for First Contact Practitioners

Background

The NHS have been actively reducing inappropriate prescribing of dependence inducing medicines such as opioids when they are no longer clinically appropriate. NHS England (NHSE) and Integrated Care System (ICS) leads have devised action plans that support people who are taking opioids.

The NHSE plan recommends a whole system approach, emphasising the role of First Contact Practitioners (FCPs) in reducing inappropriate opioid prescribing¹.





So why worry about opioids?

- Opioids are good analgesics for acute pain and pain at the end-of-life, but not for long-term non-cancer pain².
- There is a significant increased risk of death, particularly at morphine equivalent doses of >120mg/day².
- Opioids commonly cause fluctuating drowsiness at the start of treatment and following dose increases, risking impairment to daily activities like driving.^{2,3}.
- Advice should be sought from your GP or pharmacist if your daily activities are impacted by drowsiness.

Drugs and Driving: The Law

It's illegal in England, Scotland and Wales to drive with legal drugs in your body if it impairs your driving.

Legal drugs are prescription or over-the-counter medicines. If you're taking them and not sure if you should drive, talk to your doctor, pharmacist or healthcare professional.

You can drive after taking prescription medicines if:-

- you've been prescribed them and followed advice on how to take them by a healthcare professional.
- They are not causing you to be unfit to drive even if you're above the specified limits.

More information can be found on the UK Government website www.gov.uk in the 'Drugs and driving: The Law' section.

Some numbers These statistics highlight the impact of opioids.

In England and Wales, opioids were involved in

of drug poisonings in 2021, with 2,219 deaths⁴

Heroin and morphine are the most frequently mentioned opioid with

Deaths associated with tramadol and codeine have been on a gradual incline since 1993 in England and Wales⁴.

Public Health England found

540,000

patients still received an opioid prescription continuously between April 2015 and March 2018 despite the associated risks⁵.

How side effects impact quality of life

- Mood changes and cognitive impairments
- Constipation, nausea, drowsiness (occurs in short-term use as well)²
- Hyperalgesia an increased sensitivity to pain and extreme response to pain²
- Reduced sex drive, erectile dysfunction and infertility²
- Mood changes and memory loss²
- Sleep apnoea²
- Drowsiness, which can be fluctuating throughout the day²
- Increased risk of dependence.²
- Increased risk of death²

How FCPs can help?



Patient contacts with FCPs are a great opportunity to engage patients about opioids by:-

- Identifying whether long-term opioid use is still appropriate.
- · Identifying any possible side effects to opioids.
- Educating patients about the impact of taking opioids on quality of life and offer information leaflets to take away and consider.
- Referring patients to their GP and practice pharmacist for a conversation about opioid reduction.
- Signposting patients for further support such as social prescribing.
- Understanding where your social prescribing link is.

Reducing opioids

Opioids should not be stopped suddenly. A shared-decision making process should be adopted between the patient and their GP or practice pharmacist instigating a gradual reduction at an agreed pace, with the knowledge it can be altered for various life changes².

Approaching the topic of reducing opioids with a patient can be challenging for anyone, but here are some questions you can use to help initiate this conversation.

- What's a day in your life like living with pain?
- What strategies are you using to manage your pain?
- Do your pain related medicines change your pain?

- There are some side effects linked to pain modifying medications, would you like me to talk to you about them?
- What is currently important to you?
- Would you like support with this?

Depending on what you feel you need, we could send to see one of our personalised care team, the GP, the pharmacist, link worker or social prescriber, who can support you to feel better? Is this something you are interested in?

Depending on the response to these questions, it may be appropriate to have a conversation about opioid prescription review with an aim of opioid reduction. Inviting the patient to consider a referral to their GP or practice pharmacist can be suggested.

Summary

- Inappropriate opioids use is a significant concern for the NHS.
- The NHS is aiming to reduce inappropriate opioid prescribing and FCPs play a vital role, by signposting to the appropriate professional.
- Opioids are not usually recommended for chronic pain and do very little to improve quality of life.
- FCPs can initiate a conversation on opioid education and refer for opioid reduction or additional support such as social prescribing if appropriate.
- Use the example questions to initiate conversations about reducing opioids, leading to potential tapering plans.
- Personalised care approaches are a more effective way to help patients to better manage their pain and reduce harms caused by opioid prescribing.

Useful resources for FCPs

- https://www.nice.org.uk/guidance/NG193
- https://fpm.ac.uk/sites/fpm/files/documents/2019-09/FPM-OA-About-Pain.pdf
- https://www.youtube.com/watch?v=hnqGvUlf3ic&embeds_referring_euri=https%3A%2F%2Fahsn-nenc.org.uk%2F&source_ve_path=OTY3MTQ&feature=emb_imp_woyt

Resources for patients with variable needs

- https://www.flippinpain.co.uk/app/uploads/2021/06/Flippin-Pain-If-Only-Id-Known-Leaflet.pdf
- https://healthinnovationnenc.org.uk/wp-content/uploads/2023/10/opioid-lottery-v03.pdf
- https://healthinnovationnenc.org.uk/wp-content/uploads/2023/10/Ten-footsteps-booklet-online-v01.pdf
- https://fpm.ac.uk/sites/fpm/files/documents/2019-09/FPM-OA-opioid-treatment.pdf
- https://fpm.ac.uk/sites/fpm/files/documents/2019-09/FPM-OA-About-Pain.pdf
- https://www.britishpainsociety.org/people-with-pain/frequently-asked-questions/

References

- (1) NHS England. Opioid prescriptions cut by almost half a million in four years as NHS continues crackdown. 2023; Available at: https://www.england.nhs.uk/2023/03/opioid-prescriptions-cut-by-almost-half-a-million-in-four-years-as-nhs-continues-crackdown/.
- (2) The Faculty of Pain Medicine. Opioids aware. 2022; Available at: https://www.fpm.ac.uk/opioids-aware
- (3) Home Office Gov. (2022). Drugs and driving: the law. https://www.gov.uk/drug-driving-law. Retrieved 28/06/2023, from https://www.gov.uk/drug-driving-law
- (4) Office for National Statistics. Deaths related to drug poisoning in England and Wales: 2021 registrations. Office for National Statistics 2022 Aug 3.
- (5) Public Health England. Prescribed medicines review: summary. Office for National Statistics. Deaths related to drug poisoning in England and Wales: 2021 registrations. Office for National Statistics 2022 Aug 3.

Produced by