

# Precepting Tips for Opioid Use in Older Adults



## Overview

- Prevalence of opioid addiction



*Any age across the adult lifespan is approximately 10-15%*



*Adults over 65 is approximately 1%*

- **Risk Factors** for opioid use disorder (OUD) in older adults:
  - Past exposure to opioid pain medication
  - Emotional or behavioral problems
  - Chronic pain
  - Tobacco or other nicotine use.
- Factors that can lead to **difficulty in diagnosing OUD in older adults**:
  - Memory issues or dementia
  - Denial
  - Side effects of other medications.

## Presentation and Symptoms

### Symptoms of Withdrawal from Opioids

- Anxiety
- Restlessness
- Tachycardia
- Dilated pupils
- Runny nose
- Tearing
- Loose stools
- Sweating
- Tremor

### Signs of Opioid Use Disorder (OUD)

The individual:

- Takes more opioids than have been prescribed and/or for a longer period than intended
- Tries to decrease use without success
- Finds it difficult to fulfill social or professional obligations due to the opioids
- Uses opioids when doing so is dangerous
- Experiences tolerance and/or withdrawal symptoms
- Continues to take opioids knowing they are causing problems in their life
- Spends a lot of time obtaining opioids or recovering from their use
- Craves opioids

## Screening and Assessment Tools

- **Opioid Risk Tool (ORT)**: A simple-to-use, short, and validated tool used with adult patients in primary care settings to evaluate the risk of opioid abuse in patients prescribed opioids for treatment of chronic pain. (<https://nida.nih.gov/sites/default/files/opioidrisktool.pdf>)
- **Prescription Opioid Misuse Index**: A 6-question, self-report survey, this tool is used to predict a patient's risk of OUD. The tool has not been validated. It requires more training to use successfully. (<https://top.albertadoctors.org/file/Opioid%20Tool%20Posters-POMI%20F24.pdf>)
- **Clinical Opiate Withdrawal Scale (COWS)** is an 11-item assessment administered by providers in both inpatient and outpatient settings to assess signs of opiate withdrawal and determine the extent of the patient's dependence on opioids. However, the COWS scale contains items that can be difficult to pinpoint as OUD-related in older patients for whom they may actually be signs of dementia. Some of the criteria (such as resting pulse rate, restlessness, and GI upset) might be caused by side effects from medications or behavioral issues that can be common to older adults. (<https://nida.nih.gov/sites/default/files/ClinicalOpiateWithdrawalScale.pdf>)



## Management of Opioid Use Disorder

### Non-pharmacological Treatment

- 12-Step facilitated treatment, Alcoholics Anonymous or Narcotics Anonymous
- Treatment for mental health, pain, anxiety
- Mindfulness, meditation, yoga, acupuncture (which can help with short-term symptoms but little evidence for long-term)

### Pharmacological Treatment

- Methadone, buprenorphine (Suboxone), Vivitrol

### Specialist Consultation or Transfer of Patient for Patients with . . .

- Chronic benzodiazepine use with opioid use disorder
- Complex alcohol use with opioid use disorder
- Complex cardiovascular disease and OUD
- Continued use of non-prescribed opioids while on 24mg or higher of buprenorphine

## Community Resources to Share with Patients

- [Narcotics Anonymous Virtual Meetings](https://www.na.org/?ID=virtual_meetings) (https://www.na.org/?ID=virtual\_meetings)
- [Narcotics Anonymous Online and Phone Meetings](https://virtual-na.org/) (https://virtual-na.org/)
- [Alcoholics Anonymous Online Group Meetings](https://www.onlinegroupaa.org/) (https://www.onlinegroupaa.org/)
- [The Addiction Recovery Guide](https://www.addictionrecoveryguide.org/resources/online_communications/chat_rooms) (https://www.addictionrecoveryguide.org/resources/online\_communications/chat\_rooms)
- Find treatment by calling SAMHSA's National Helpline at 1-800-662-HELP or by going to [SAMHSA's Behavioral Health Treatment Services Locator](https://findtreatment.gov/) (https://findtreatment.gov/)

## Teaching Tips: Ask students to . . .

- Assess a patient for risk factors for opioid use disorder and discuss their findings with the preceptor
- Have a learner conduct an Opioid Risk Tool (ORT) assessment with a patient
- Evaluate a patient for opioid withdrawal using the Clinical Opiate Withdrawal Scale (COWS)
- Review a patient's healthcare record for possible medications that can mask or mimic opioid withdrawal or intoxication

## Preceptor Resources

- Duggirala, R., Khushalani, S., Palmer, T., Brandt, N., & Desai, A. (2022). Screening for and management of opioid use disorder in older adults in primary care. *Clinics in Geriatric Medicine*, 38(1), 23-38. <https://doi.org/10.1016/j.cger.2021.07.001>
- Substance Abuse and Mental Health Services Administration. (2020). Treating substance use disorder in older adults: Treatment improvement protocol TIP 26. Retrieved from: [https://store.samhsa.gov/sites/default/files/SAMHSA\\_Digital\\_Download/PEP20-02-01-011%20PDF%20508c.pdf](https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PEP20-02-01-011%20PDF%20508c.pdf)