

Pre-operative opioid weaning – how are we doing?

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'Surgery and Opioids: Best Practice Guidelines 2021', published jointly by the Royal College of Anaesthetists, Faculty of Pain Medicine, British Pain Society and others state 'opioid weaning should be considered before surgery if feasible'¹. Our trust is located within the Manchester CCG, which lies in the in the top quartile of >120mg oral morphine equivalence prescribing CCGs in the country². However, within our trust there were no locally published guidelines supporting doctors and patients in weaning inappropriately high doses of opioid medications and no pathway to enable pre-operative opioid weaning.

Methods

We conducted a survey within the Anaesthetic and Pre-assessment Department to elucidate the need for education and guidelines to enable the identification and weaning of patients who would benefit from this. There were five questions and the survey was distributed via email and Whatsapp as a Google Form.

Results

17 members of staff completed our survey, including Anaesthetic consultants, trainees and pre-assessment nurses. 35% stated a lack of confidence (1/2 on a confidence scale) when performing oral Morphine equivalent calculations, 47% reported a lack of confidence when identifying patients who would benefit from pre-operative opioid weaning.

65% stated a lack of confidence when offering advice to patients on how to wean their opioids pre-operatively, 88% said they would find trust guidelines to aid pre-operative opioid reduction useful, and 94% said a patient information leaflet would be useful as well.

Figure 1

1. How confident from 1 (not at all confident) to 5 (very confident) do you feel performing Oral Morphine equivalent calculations?

17 responses

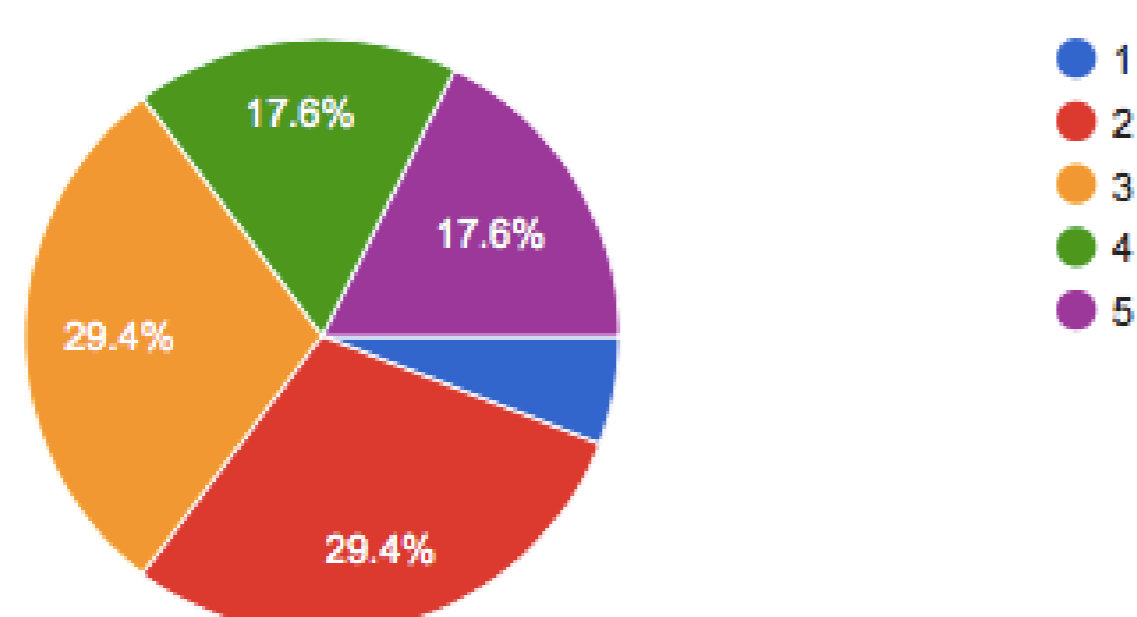


Figure 1. Pie chart showing results of confidence distribution (from 1 (not at all confident) to 5 (very confident) amongst staff regarding their confidence when performing Oral Morphine equivalent calculations.

Figure 2

2. How confident from 1 (not at all confident) to 5 (very confident) are you when identifying patients who may benefit from pre-operative opioid reduction advice?

17 responses

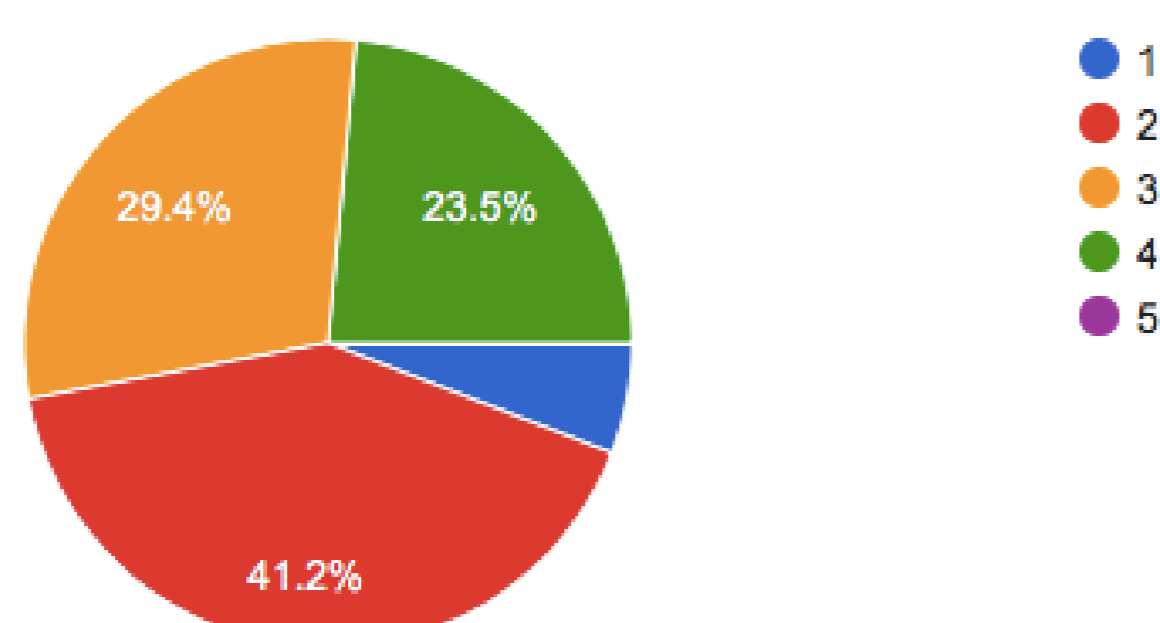


Figure 2. Pie chart showing results of confidence distribution (from 1 (not at all confident) to 5 (very confident) amongst staff regarding their confidence when identifying patients who may benefit from pre-operative opioid reduction.

Figure 3

3. How confident from 1 (not at all confident) to 5 (very confident) do you feel when offering advice to patients on how to go about reducing their Opioid consumption pre-operatively?

17 responses

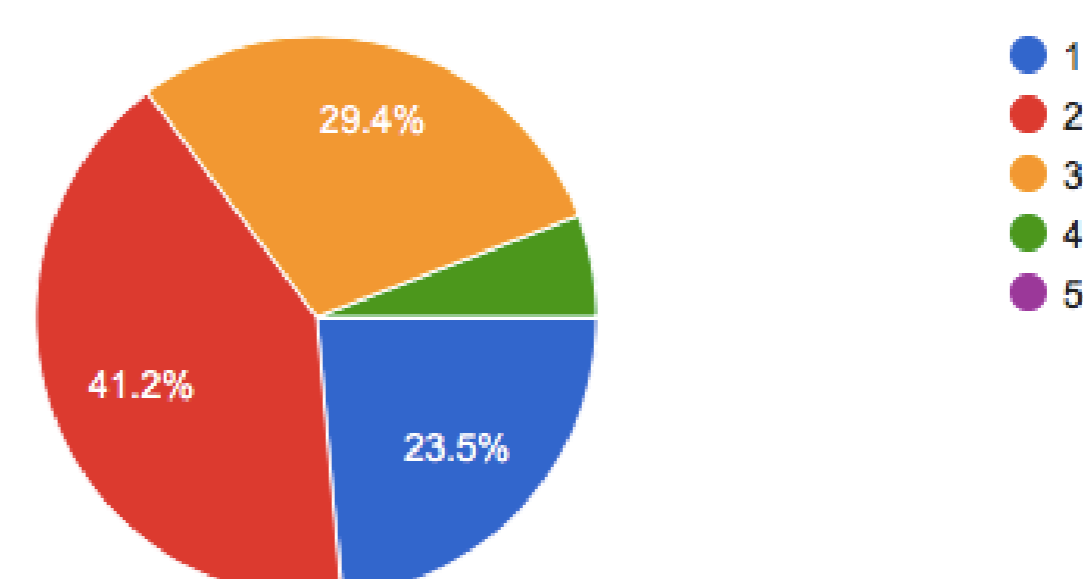


Figure 3. Pie chart showing results of confidence distribution (from 1 (not at all confident) to 5 (very confident) amongst staff regarding their confidence when offering advice on how to wean opioids pre-operatively.

Figure 4

4. Would you find Trust Guidelines on pre-operative opioid reduction useful?

17 responses

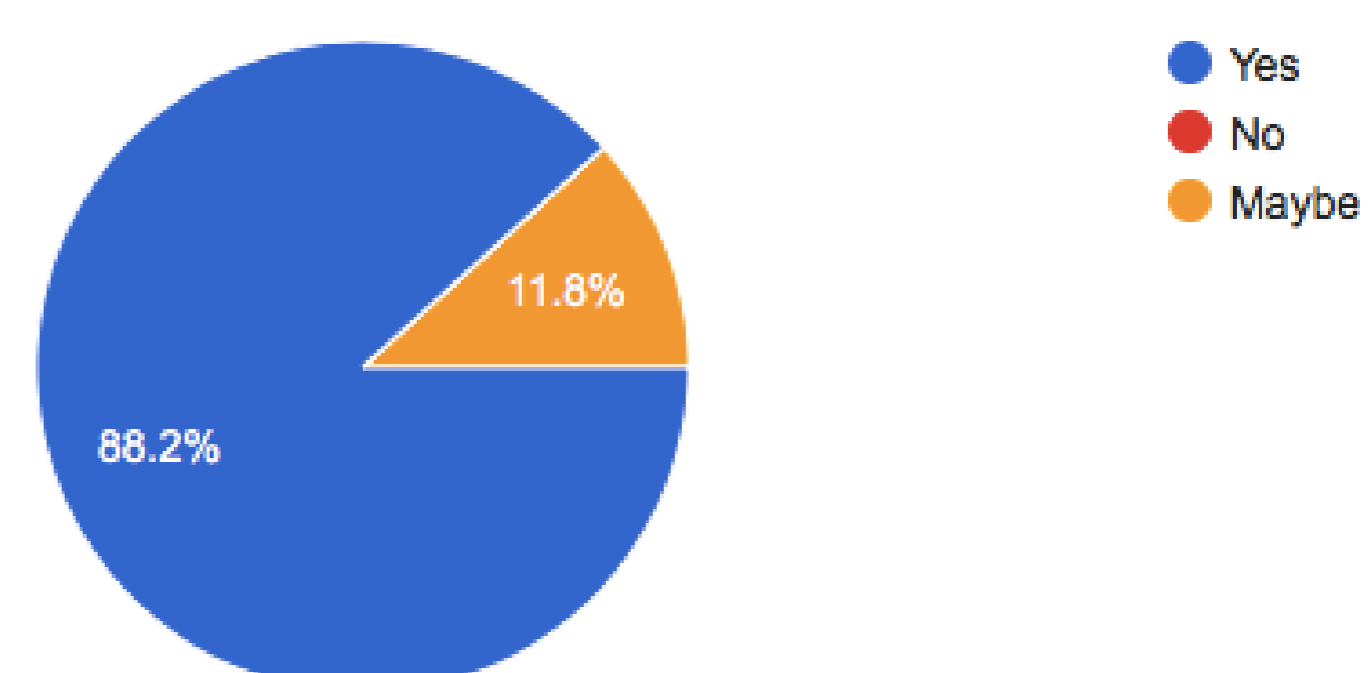


Figure 4. Pie chart showing results of staff survey – whether Trust guidelines would be useful.

After receiving this feedback from our colleagues, we were confident we had identified an area of clinical need. In order to help clinicians and patients to achieve a dose reduction in a safe and sustainable way, we produced clinical guidelines and a patient information leaflet. We consulted with key stakeholders to produce guidelines, edited drafts according to the feedback we received and submitted them to the trust panel for review and publication.

Conclusions

Through engagement of key stakeholders within our department, we were able to identify an area of clinical need. As a result we have produced new guidelines to enable pre-operative opioid weaning in appropriate patients. We will re-assess clinician confidence and quantify the impact of our guidelines on pre-operative opioid dosing once they are well established within the department.

References

1. Faculty of Pain Medicine, 2021, Surgery and Opioids Best Practice Guidelines 2021, online - URL https://fpm.ac.uk/sites/fpm/files/documents/2021-03/surgery-and-opioids-2021_4.pdf
2. EBM DataLab, <https://openprescribing.net/measure/opioidspercent/ccg/14L>, accessed 04/10/2022