

FEASIBILITY AND ACCEPTABILITY OF AN OVERDOSE PREVENTION INTERVENTION DELIVERED BY COMMUNITY PHARMACISTS FOR PATIENTS PRESCRIBED OPIOIDS FOR CHRONIC NON-CANCER PAIN

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Background:

There have been increases in the prescribing of high strength opioids for patients with chronic non-cancer pain (CNCP), but this group are often overlooked in overdose prevention interventions. This study examined the feasibility and acceptability of an overdose prevention intervention (opioid safety training, naloxone training, and take-home naloxone provision) delivered by community pharmacies for patients prescribed high strength opioids for CNCP in Scotland.

Methods:

All patients completed a baseline questionnaire prior to the intervention to gather demographic data, measures of general health, drug use (prescription and non-prescription) and alcohol use. In total, twelve participants received the overdose prevention intervention in their community pharmacies. Six months post-intervention, a follow up questionnaire was sent to all participants. All patients and community pharmacists were invited to an interview about receiving or delivering the intervention. Seven patients and four community pharmacists were interviewed. Qualitative data were analysed using Framework Analysis.

Results:

Initially patients did not perceive themselves as being at risk of overdose and considered others, such as people who use non-prescription/ illicit drugs, as being more suited to the intervention. However, patients developed insight into risks of prescription opioids and the value of naloxone following the intervention. Pharmacists identified low overdose awareness and risk perceptions of patients prior to the intervention. Pharmacists had positive attitudes towards the intervention, but outlined challenges associated with delivering the intervention in practice.

Conclusion:

Findings mirror previous evidence related to low risk perceptions and overdose awareness amongst CNCP patients prescribed high strength opioids. Bespoke overdose prevention interventions are required to attend to critical gaps in harm reduction provisions in this patient group. Community pharmacists can effectively deliver overdose prevention interventions but must be fairly reimbursed to do so.

Disclosure of Interest Statement:

No conflicts of interest to report.