Understanding Providers’ Emotions and Thoughts Regarding Opioid Use for the Management of Chronic Noncancer Pain (CNCP) in a Family Medicine Residency Program

Kayla Flores, MD1; Stephanie McDearmon, MD1; Brandon Phelps, DO2; Jessica J. F. Kram1,2, MPH; Dennis J. Baugardner1,2, MD; Fabiana Kotovicz, MD1,2

1Department of Family Medicine, Aurora Health Care, Milwaukee, WI; 2Aurora University of Wisconsin Medical Group, Milwaukee, WI; 3Center for Urban Population Health, Milwaukee, WI

BACKGROUND

In 2014, almost 2 million Americans abused or were dependent on prescription opioids.1

Opioids are responsible for:
- Three-fourths of all prescription drug overdose deaths in 2013;2
- More than 16,200 deaths in the United States in 2013;3
- Nationally, deaths involving opioids have quadrupled since 1999.4

The sharp rise in prescription opioid overdose deaths closely parallels the increase in the prescribing of these drugs. Opioid sales in the United States quadrupled from 1999 to 2010.5

TREATMENT of CNCP with opioids is a major medical and social challenge for primary care providers.

OBJECTIVES

To conduct a focus group that would identify attitudes, emotions, and reflections of providers as they treat patients with opioids for CNCP.

METHODS

As part of a multi-faceted quality improvement study conducted within our family medicine residency program, one pharmacist, four family medicine faculty members and five residents participated.

A trained medical student, in the presence of key investigators, moderated the focus group.

Participants were provided anonymous aliases and responses were audio-recorded.

Audio recording was transcribed and analyzed by the diversity index, calculated with analysis of text bytes and substantive respondents.5,6 Themes were verified by manual coding.

Participants were asked to respond to a series of open ended questions and statements about the opioid epidemic, as well as clinical vignettes.

Attention was also given to participants’ emotions through utilization of a recording tool. Non-verbal expressions including tone and body language were interpreted and equated to one or more emotions.

RESULTS

Focus group main themes on CNCP patients and treatment (Table 1):

1. The CNCP Patient Population
2. Provider Strategies and Practices
3. Provider Struggles and Emotions
4. Challenges in CNCP Management
5. What Works and What Else May Work

Among sixteen emotions, the most commonly exhibited by participants during the focus group were: engaged, agreeing, calm and quiet.

Statement and answer samples:

A new patient is scheduled for chronic pain

• THEME: Provider Struggles and Emotions
  • “I immediately start to notice, physiologically, anxiety and discomfort because of previous encounters when I got yelled at or when things went terribly wrong.”

Difficulty managing patient expectations

• THEME: The CNCP Patient Population
  • “It is usually the patient that mentions it [getting opioids prescribed] and it triggers me that the patient has a prescribed notion of what they want.”

I know who will abuse opioids.

• THEME: The CNCP Patient Population
  • “It is hard to say no when you’re new and doubt for clinicians managing CNCP?

Do resident physicians feel targeted by patients?

• THEME: The CNCP Patient Population
  • “It is hard to say no when you’re new and especially when they say ‘my other doctor used to,’ ‘just moved,’ ‘or my insurance changed’.”

Do clinicians mistrust patients?

• THEME: The CNCP Patient Population
  • “As a provider I ‘start to realize it is the same old story, but a different version. You realize [the patient] is tactical.”

CONCLUSIONS

While a predominance of negative experiences and challenges were reported, positive emotions during this focus group demonstrated that providers appreciated the opportunity to share their experiences on this sensitive topic.

Primary care providers face barriers to treat CNCP patients on an individual and institutional level. Better provider training and implementation of standard guidelines were among the most common suggestions for improvement.

Input obtained during this focus group was used to help our institution develop standardized practice guidelines for the use of opioids for CNCP in the primary care setting.

REFERENCES

1. Substance Abuse and Mental Health Services Administration, National Survey on Drug Use and Health, 2014.
2. CDC. CDC WONDER Multiple Cause of Death data, 1999–2013.

ACKNOWLEDGEMENTS

We would like to acknowledge Danielle Greer, PhD for assistance in the interpretation of our qualitative results.

We would also like to acknowledge Dr. Michael McNett, Dr. Christopher Klink, and Dr. Brian Wallace to their ongoing organization and moderation of the focus group.

Last, we want to acknowledge Courtney Pokrzywa for the organization and moderation of the focus group.

Table 1. Numbers of theme bytes and respondents and levels of participant contribution and diversity in contribution per theme and subtheme.

<table>
<thead>
<tr>
<th>Theme or Subtheme</th>
<th>Total text bytes, N (%)</th>
<th>Substantive text bytes, N (%)</th>
<th>Total unique respondents, N (%)</th>
<th>Substantive respondents, N (%)</th>
<th>Participant contribution, min %, max %, N (%)</th>
<th>Respondent diversity index, N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The CNCP Patient Population</td>
<td>39 (15.29)</td>
<td>39 (15.7)</td>
<td>10</td>
<td>10</td>
<td>2.56–2.05</td>
<td>0.311</td>
</tr>
<tr>
<td>General Composition and Behavior</td>
<td>16 (6.27)</td>
<td>16 (6.43)</td>
<td>7</td>
<td>7</td>
<td>0 – 25.0</td>
<td>0.188</td>
</tr>
<tr>
<td>Opioid Seeking Strategies and Behaviors</td>
<td>16 (6.27)</td>
<td>16 (6.43)</td>
<td>6</td>
<td>6</td>
<td>0 – 31.3</td>
<td>0.203</td>
</tr>
<tr>
<td>Red Flags for Opioid Abuse</td>
<td>7 (2.75)</td>
<td>7 (2.81)</td>
<td>6</td>
<td>6</td>
<td>0 – 28.6</td>
<td>0.184</td>
</tr>
<tr>
<td>Provider Strategies and Practices</td>
<td>58 (22.75)</td>
<td>57 (22.9)</td>
<td>10</td>
<td>10</td>
<td>1.75 – 29.8</td>
<td>0.178</td>
</tr>
<tr>
<td>Pain Management</td>
<td>20 (7.84)</td>
<td>20 (8.03)</td>
<td>8</td>
<td>8</td>
<td>0 – 35.0</td>
<td>0.200</td>
</tr>
<tr>
<td>Opiate Prescribing and Dispensing</td>
<td>15 (5.88)</td>
<td>14 (5.62)</td>
<td>5</td>
<td>5</td>
<td>0 – 35.7</td>
<td>0.236</td>
</tr>
<tr>
<td>Conflict Assistance</td>
<td>6 (2.35)</td>
<td>6 (2.41)</td>
<td>6</td>
<td>6</td>
<td>0 – 16.7</td>
<td>0.167</td>
</tr>
<tr>
<td>Confronting and Minimizing Opioid Abuse</td>
<td>8 (3.14)</td>
<td>8 (3.21)</td>
<td>4</td>
<td>4</td>
<td>0 – 37.5</td>
<td>0.281</td>
</tr>
<tr>
<td>Risk Assessment for Opioid Addiction</td>
<td>9 (3.53)</td>
<td>9 (3.61)</td>
<td>3</td>
<td>3</td>
<td>0 – 44.0</td>
<td>0.407</td>
</tr>
<tr>
<td>Provider Struggles and Emotions</td>
<td>47 (18.45)</td>
<td>46 (18.5)</td>
<td>10</td>
<td>10</td>
<td>2.17 – 21.7</td>
<td>0.128</td>
</tr>
<tr>
<td>Troubles and Weaknesses</td>
<td>13 (5.1)</td>
<td>12 (4.82)</td>
<td>7</td>
<td>6</td>
<td>0 – 41.7</td>
<td>0.219</td>
</tr>
<tr>
<td>Discomfort, Anxiety, Dread, and Fear</td>
<td>12 (4.71)</td>
<td>12 (4.82)</td>
<td>8</td>
<td>8</td>
<td>0 – 25.0</td>
<td>0.153</td>
</tr>
<tr>
<td>Discomfort, Anxiety, and Fear</td>
<td>14 (5.49)</td>
<td>14 (5.63)</td>
<td>6</td>
<td>6</td>
<td>0 – 28.6</td>
<td>0.204</td>
</tr>
<tr>
<td>Concern, Frustration, and Hypervigilance</td>
<td>8 (3.14)</td>
<td>8 (3.21)</td>
<td>5</td>
<td>5</td>
<td>0 – 50.0</td>
<td>0.313</td>
</tr>
<tr>
<td>Challenges in CNCP Management</td>
<td>68 (26.67)</td>
<td>67 (26.9)</td>
<td>9</td>
<td>9</td>
<td>0 – 32.8</td>
<td>0.196</td>
</tr>
<tr>
<td>Patient Challenges</td>
<td>27 (10.59)</td>
<td>26 (10.4)</td>
<td>8</td>
<td>8</td>
<td>0 – 34.6</td>
<td>0.221</td>
</tr>
<tr>
<td>Patient and Provider Accountability</td>
<td>14 (5.31)</td>
<td>11 (4.42)</td>
<td>7</td>
<td>7</td>
<td>0 – 27.3</td>
<td>0.173</td>
</tr>
<tr>
<td>Drawbacks in the Current System</td>
<td>25 (9.8)</td>
<td>25 (10.0)</td>
<td>9</td>
<td>9</td>
<td>0 – 32.0</td>
<td>0.184</td>
</tr>
<tr>
<td>Time Limitations and Delays</td>
<td>5 (1.96)</td>
<td>5 (2.01)</td>
<td>3</td>
<td>3</td>
<td>0 – 40.0</td>
<td>0.360</td>
</tr>
<tr>
<td>What Works and What Else May Work</td>
<td>43 (16.86)</td>
<td>40 (16.1)</td>
<td>9</td>
<td>9</td>
<td>0 – 35.0</td>
<td>0.249</td>
</tr>
<tr>
<td>Strengths in the Current System</td>
<td>14 (5.49)</td>
<td>13 (5.22)</td>
<td>6</td>
<td>6</td>
<td>0 – 38.5</td>
<td>0.265</td>
</tr>
<tr>
<td>Promising Approaches</td>
<td>29 (11.37)</td>
<td>27 (10.8)</td>
<td>5</td>
<td>5</td>
<td>0 – 40.7</td>
<td>0.258</td>
</tr>
</tbody>
</table>