SOLVING THE OPIOID EPIDEMIC IS MORE THAN ACTION, IT’S A MINDSET

By Nick Tod

Healthcare providers, politicians, and community members at large all agree action needs to be taken to address the opioid crisis. While the conversation around how to handle this crisis is a step towards making progress in our communities, much more is needed to experience meaningful results. Before we can truly address the epidemic, there needs to be a change in the mindset towards opioids and individuals with an opioid use disorder (OUD). This is especially true for primary care physicians (PCPs). Despite being perhaps the most capable of addressing this epidemic, there are barriers in primary care that limit the effectiveness of pain management and treatment of patients with an OUD.

The worsening of the opioid crisis has coincided with increased scrutiny of how pain management is approached by PCPs. The push for safe prescribing practices and fear of abuse has led physicians to be extra cautious when prescribing medication, leaving some patients with inadequate pain relief. This is why it is important to take a holistic approach to pain management and treat every patient on a case-by-case basis. There are a number of treatments available for pain relief, and many alternative methods are now covered by insurance. When opioids are the best option, Narcan can be co-prescribed as a precaution for overdose. Every patient’s experience with pain is unique, and for PCPs, treating pain safely and effectively means having an understanding of all available options and personalizing treatment for each patient.

Addiction is a disease.

Just like cancer and diabetes, addiction is a treatable illness. Unfortunately, unlike these conditions, addiction tends to be viewed as a moral failure of the individual who suffers from it. As a result, many individuals suffering from an OUD find it difficult to seek help because there are few places that provide the treatment they need, and

ABOUT THE AUTHOR:

Nick Tod is a bachelors graduate of the Cal Poly San Luis Obispo University who is currently applying for medical school.
fewer where they feel comfortable and respected. Despite recent emphasis on directing patients into treatment programs, if patients do not feel comfortable, the effects are limited. When approaching this epidemic from a policy standpoint, it is easy to get caught up in the statistics and trends. However, it is important not to forget that these are real people who are suffering, and the human aspect cannot be ignored. Building trust with an individual who has experienced stigma from the community due to their illness is difficult, but the best way to start is by listening. Everyone has a story to tell, and one of the most valuable assets in life is having an ally who is willing to listen and offer support. PCPs who have the capacity to engage with patients on a personal level are invaluable to those struggling with an OUD because they have the ability to listen and provide assistance.

Despite the stigma that surrounds opioid use, addiction has no bias and affects individuals from all walks of life. By changing some of the attitudes in the primary care setting, we can begin to reduce the loss suffered through this horrible epidemic.