Clinical nurses may encounter patients recovering from substance abuse who will need acute or chronic pain management. Knowing how to assess, treat, and manage that pain is a benefit to the nurse and patient. In addition, understanding and overcoming bias toward patients with a history of substance abuse can lead to a trusting relationship and more effective pain management. A thorough assessment and documentation of the patient’s pain during each visit provide a solid basis for prescribing opioids to patients with a history of substance abuse. The use of long-acting and higher-dose opioids in this population will be discussed. Functional improvement versus absence of pain may be a more realistic goal for patients recovering from substance abuse, and complementary and alternative therapy may be considered. Setting standards to deal with lost prescriptions or medication, missed appointments, and the use of contracts for all patients receiving opioids establishes unbiased treatment.

Managing Chronic Pain in Patients With Cancer Who Have a History of Substance Abuse

Susan Pillet, MSN, RN, CPNP, CPON®, and Valerie Eschiti, PhD, RN, CHTP, AHN-BC

Pain Treatment for Patients With a History of Substance Abuse

Acute and Chronic Pain

Patients with a history of substance abuse should be treated for acute and chronic pain. This statement is easier to adhere to for acute pain, in which the cause of the pain and the anticipated recovery time is known. However, chronic pain management is more complicated. Some question whether opioids should be given to any patient with chronic pain (Nedeljkovic, Wasan, & Jamison, 2002), let alone patients with a history of substance abuse.

The primary goal in pain management is to provide pain relief regardless of the patient’s past history of substance abuse. To do this, the practitioner must accept the patient’s...