Oncology 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.

At a Glance
- For both acute and chronic pain, patients with cancer who are recovering from substance abuse disorders should receive treatment.
- Preexisting bias toward this patient population should be taken into consideration when prescribing opioids.
- A trusting relationship should be established between the patient and practitioner for optimal pain management.