

Pain Relief Foundation Grant – Interim Report

Grant Title: A feasibility study of a Behavioural intervention for Opioid Reduction (BIOR) in primary care

Award Holder: Professor Helen Poole (Liverpool John Moores University)

Project Aims: This project aims to:

1. Understand if a behaviour change intervention in primary care can support patients with CNCP to reduce/stop long-term opioid use
2. Understand patients' expectations around the behaviour intervention and its implementation
3. Understand health care professionals (HCP) expectations and views of the behaviour intervention and its implementations
4. Assess changes in opioid use and pain over time between trial groups to identify potential effect sizes to calculate sample size for a larger trial.

Abstract

Introduction: Around 30-50% of adults suffer from moderate to severe chronic pain not caused by cancer. Some are treated with opioids which over time may cease to be effective and produce unpleasant side effects (e.g., nausea, drowsiness and constipation). Stopping taking opioids abruptly can cause unpleasant withdrawal effects. Tapering the opioid drug in small steps is recommended, though some patients might struggle and need support. Experience from treating patients with substance dependence tells us that interventions offering education and psychosocial support can help. This is a multi-centre brief behavioural intervention delivered by health professionals using psychological techniques, interviews and questionnaires.

Methods and Analysis: This study is a randomised control trial to investigate the effectiveness and feasibility of reducing use of inappropriately high doses of opioids through a tapering protocol, education and support in primary care. Working with NHS Knowsley CCG we will identify patients who are over 18 years old, taking 120mg or above morphine equivalent dose (MED) of opioids per day, to be randomly allocated to either the tapering group or tapering with support group. Both groups will have their opioid reduced by 10% per week. The taper with support group will have access to additional support during the process, including motivational counselling, realistic goal setting and a toolkit of resources to promote self-management. Some patients will successfully reduce their dose each week. For others, this may be more difficult, and the tapering reduction will be adjusted to 10% per fortnight. We assess opioid use, pain and quality of life in both groups at the start and end of the study to determine what works best to support people with chronic pain who wish to stop taking opioids.

Dissemination: The results will be published in peer-reviewed journals and disseminated to patient stakeholders in a lay summary report which will be available on the project website and in participating GP surgeries.

Study progress to date:

We appointed Dr Begley as a Research Assistant in December 2021. She left to take up a post in Bath and was replaced by Ms Aimee Woods in February 2022. Alongside the Research Assistant, Prof Poole and Dr Montgomery were successful in securing funds for a PhD student, Ms Ramos Silva whose research aligns with the BIOR project.

Ms Ramos Silva is currently on maternity leave and is expected to return to study at the end of the year.

We received full HRA ethical approval on the 07th April 2022.

Training and Education: All training manuals and AHP support documentation have been completed and shared with relevant AHPs who are taking part in the study. Face-face training has commenced for AHPs in Millbrook Medical Centre, delivering educational sessions incorporating education and practice (via role play). Ms. Woods (Research Assistant) has shadowed Dr Frank (Pain consultant) during his pain clinic, to develop an understanding of the approaches that are used to encourage patients to engage with opioid tapering, and the nature of clinician/patient discussions within pain clinics. A website has been developed, providing two sites of educational resources, one for AHPs and another for participants <https://www.ljmu.ac.uk/research/centres-and-institutes/research-centre-in-brain-and-behaviour/current-research-projects/behavioural-intervention-for-opioid-reduction-bior>

Training for AHPs is currently bi-weekly, with training for social prescribers commencing late May/early June.

Identifying participants: Electronic searches have commenced to identify patients who are on 120mg MED and above, to be invited to take part in the BIOR pilot study. Ms. Woods has an honorary contract at Millbrook Medical Centre and is assisting the practice pharmacist in calculating MED for patients that have been identified as being prescribed multiple opioids. Potential participants identified by this method have been contacted by their GP inviting them into a joint clinic consultation with the GP and pain consultant.

Recruitment: The first joint clinic (Dr Frank and Dr Merriman) was held on May and 3 patients were recruited.

Dissemination and peer-review of BIOR protocol: BIOR featured virtually in the EFIC conference on the 27th-29th April. We have completed an application for clinical trials registration with ISRCTN and a submission to BMJ Open of the BIOR is in progress. The PRF have been acknowledged as funders on all the aforementioned.

Future steps for BIOR:

Consultations with Dr Frank and Dr Merriman at weekly clinics are ongoing. At these clinics, potential participants are identified and sign posted to Ms. Woods who explains the BIOR study and obtains consent. Data collection in the form of monthly questionnaires, interviews with patients and AHPs continues. Analysis of interviews can commence following completion of baseline interviews.

References

Poole HM, Montgomery C, Begley E, Ramos-Silva A, Merriman M, McCullugh R, Barton C & Frank B (2022) Behavioural Intervention to Support Opioid Reduction (BIOR) in primary care: A protocol. 12th Congress of the European Pain Federation (EFIC), Dublin, Ireland, 28/4/22

Poole HM, Frank B, Begley E, Woods A, Ramos-Silva A, Merriman M & Montgomery C (in submission) A feasibility study of a Behavioural Intervention for Opioid Reduction (BIOR) for chronic pain patients in primary care: A protocol. *BMJ Open*