Abstract

In healthcare, opioids are primarily used for pain management and anesthesia. In the last few decades, opioids have become the first-line option for both chronic and acute pain, resulting in overprescribing and, an overdependence on them. Evidence shows a direct correlation between the overprescribing of opioids for all sorts of pain, and the opioid epidemic that faces America. An estimated 4 million Americans used opioids either as a recreational drug or were dependent on them. The objectives of this project were to create and implement the asthma training protocol (ATP) for patients with mild to moderate chronic pain, using the adjuvant therapies such as NSAIDS as the first-line treatment, rather than opioids for mild to chronic pain. Design: This was a quality improvement project. There were 48 participants (staff) at a community health clinic and pain management center in New York. Statistical analysis was performed using a twotailed paired t-test. Results: The data showed significant difference between the pain levels at baseline (79.12%) and post-implementation (67.74%) with p-value (p-0.30). Pain level decreased over the duration of the implementation. Limitations: This included the short time period to implement the project. A longer time frame would allow project lead to determine whether a length of duration would lead to the continuation of adjuvant therapy or patients would experience a relapse.

Key words: opioids, chronic pain management, adjuvant therapy, opioids guidelines.