

Clinicians' Perspectives and an Ethical Analysis of Current Safer Supply Opioid Prescribing (Preliminary results)

Category: Oral Presentation

Abstract Body

Objective: With the compounding of two public health crises in British Columbia, the contaminated unregulated drug supply in 2016 and COVID-19 in 2020, momentum was created for physicians to start risk mitigation prescribing in spring 2020. Patients with opioid use disorder were prescribed hydromorphone tablets to enable physical distancing and self-isolation. Over time, these prescriptions continued as the only safer alternative widely available, based on benefits reported by clients. However, this system was never designed as a de novo safer supply (SS) program. This study aims to explore SS prescribers' perspectives on prescribing SS opioids and apply an ethical analysis to move forward the conversation on providing SS.

Methods: Physicians from a local Vancouver health authority participated in individual or small group semi-structure interviews that explored experiences, benefits, challenges, and ethical considerations with providing SS opioid prescriptions. Interviews were transcribed and analyzed for recurrent themes. Themes were then integrated into a narrative discussion based in ethical analysis through the lenses of teleology and biomedical ethics.

Results: Eleven addiction medicine physicians participated with practices in various settings. Two initial themes are clinical assessment and clinician distress. Clinician assessment has four subthemes: benefits and harms assessment for individual, client-centred care, public health impact and deprescribing. Applying an ethical analysis, teleology explains the role of the physician is to provide health promotion and the four principles of biomedical ethics can be applied to prescribing SS with the understanding that autonomy does not outweigh the other principles in every situation.

Conclusions: Meaningful conversations with clients, colleagues and stakeholders about the goals of the current SS model should continue. Further exploration of assessment nuances and steps toward to a unified approach is needed given the distress around providing SS. Ongoing research, supports and public health collaboration is required along with consideration if a different SS model could be more appropriate.

Key Words

- Caring in Crisis
- Ethical issues
- Opioids/Opiates
- Prevention/Harm Reduction
- Safe Supply

Learning Objective # 1

Identify common considerations of safer supply opioid prescribers when providing safer supply opioid prescriptions.

Learning Objective # 2

Develop an ethical framework to approach safer supply opioid prescribing.

Reference # 1

British Columbia Centre on Substance Use, BC Ministry of Health, and Ministry of Mental Health and Addictions. Risk Mitigation in the Context of Dual Health Emergencies—Interim Clinical Guidance: Update. Published January 2022. Available at: <https://www.bccsu.ca/COVID-19>

Reference # 2

Genuis, Q. I. T. (2021). A genealogy of autonomy: Freedom, paternalism, and the future of the Doctor–Client relationship. *The Journal of Medicine and Philosophy*, 46(3), 330-349. <https://doi.org/10.1093/jmp/jhab004>

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