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# Social dynamics, family history critical to identifying patients most likely to abuse pain medicines

Published on October 6, 2015 at 4:03 AM

Patients undergoing rehabilitation for physical injuries and their physicians can better understand who is most at risk of abusing opioids by reviewing their family history, lifestyle and environment for critical cues about susceptibility to addiction, according to physical medicine and rehabilitation experts.

Risk assessments are one of the few tools available for patients and physicians concerned about using opioids to manage debilitating pain during physical rehabilitation, said Richard T. Jermyn, DO, FAAPMR, who chairs the physical medicine and rehabilitation department at Rowan University School of Osteopathic Medicine. Balancing legitimate medical need with an individual's own risk factors is a primary concern for patients, many of whom worry they will become dependent on prescription pain relievers.

"No one sets out to become an addict, but abuse rates among pain patients mirror the general population, where we find about seven percent are dependent on illicit drugs. As an osteopathic physician, I seek to prevent issues like addiction by partnering with patients to help us both understand if they are susceptible to prescription drug abuse," said Dr. Jermyn, who focuses on acute and chronic pain management.

Dr. Jermyn will present sample protocols used at the Neuromusculoskeletal Institute in Stratford, New Jersey at OMED 15, the annual medical conference for osteopathic physicians (DOs), to be held October 17-21 in Orlando.

Clinically useful guides, such as the Opioid Risk Tool, offer good predictive value for physicians. Key indicators for susceptibility to addiction include:

- Age 16-45 years
- Family history of substance abuse, including alcohol, medication and illicit drugs
- Personal history of substance abuse
- History of preadolescent sexual abuse
- Personality factors, including ADD, OCD, bipolar disorder, schizophrenia and depression
- Family dynamics
- Social factors

It's important to recognize that opioids are sometimes the most effective pain treatment available for patients, regardless of their risk profile, Jermyn added. In those cases, physicians can offer an agreement to patients susceptible to addiction that includes stringent, voluntarily monitoring designed to confirm opioids are used responsibly.

## Sample Physician and At-Risk Patient Opiate Agreement

- Physician is the sole prescriber of the medication
- Patient agrees not to sell, trade, give or receive opioids
- Patient agrees to urine/serum drug tests
- Patient's opioid pills are counted at each visit
- Patient agrees not accelerate the dose or they will be without the medication

"By working together, at risk-patients and their physicians can avert the threat of addiction or abuse during the rehabilitation period," Jermyn said. "Patients who are unlikely to abuse medication are often those most afraid to take it, while at-risk patients often don't recognize that they are vulnerable."

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Source:

American Osteopathic Association

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