

# Conversation Guide

## Tapering Patients from Controlled Substances

### Introduction:

Conversations around tapering can be emotional and difficult for both patients and providers. It's important to acknowledge how unsettling it can be to begin a taper, while simultaneously highlighting its necessity. Communicating the safety risks of chronic opioid use and reassuring patients that there are safer, more effective treatments for pain are the foundation of a successful tapering conversation. This work requires compassion, persistence, and thoughtful planning. This conversation guide is intended to support you in approaching tapering conversations with patients.

### Considering the Risks:

Framing the conversation around the patient, their safety, and the risks of chronic opioid use is paramount. Avoid mentioning other factors like your comfort as a provider, the law or the opioid epidemic. Being direct and persistent but also patient and kind with patients will ensure they understand the gravity of the situation.

Once you've made the decision to taper, it's important to have a plan going into the conversation. Being confident in your rationale and understanding the risks of chronic opioid use will help you prepare for the tapering conversation. Risks of chronic opioid use include:

- Diminished pain control, hyperalgesia
- Impaired function
- Breathing problems during sleep
- Opioid dependence, tolerance
- Development of a use disorder
- Accidental overdose, death

### Establishing Goals and Responsibilities:

Reframing the purpose of treatment from pain control to achievement of functional goals can drive motivation in a patient undergoing a taper. Validated tools like the Pain Disability Index may help drive this focus and support in identifying a patient's functional goals. Setting goals empowers patients with some control over their treatment plans, which can improve their engagement and satisfaction.

Developing an opioid tapering agreement or informed consent form is a helpful way to document the conversation, goals, and responsibilities in the tapering process for both providers and patients. Formatting this as a sheet with fillable fields for setting goals, expectations and responsibilities is a simple and accessible way to achieve this. Some questions that may be helpful to answer include:

- What are my goals?
- What are my responsibilities?
- What can I expect to experience?
- What are my provider's responsibilities?
- What are my provider's goals?



### Responsibilities of the Care Team:

A team-based approach to tapering patients can reduce the burden on the provider while reiterating to the patient the importance of this process. Ensuring a consistent, aligned message from care team members including nurses, counselors, medical assistants and behavioral health providers will reassure patients that they have comprehensive support throughout the tapering process.

# Language Examples

## For Navigating Tapering Conversations with Patients

“As **better information** has become available, we have learned that your dose of opioid has much higher risks than lower doses.”

- Your risk of accidental overdose is increased 900%.
- Your risk of dying sooner than you otherwise would is increased 300%.
- You are increased risk of injury.
- You are at risk for becoming the victim of a crime.

“As many as 4 out of 10 people taking opioids will develop an addiction, and they may not even know it. **Taking opioids for even a short time causes dependence.** That means that you would have withdrawal symptoms if the meds were stopped suddenly. Higher doses of opioids have not been shown to help and **may increase your pain.** Also, there are **no studies that prove there is actual benefit** from taking opioids for a long time and for problems like headaches, back pain, fibromyalgia and neuropathy good studies show that opioids do NOT help. Additionally, **opioids increase the risk of heart disease, erectile dysfunction, severe constipation, depression, and suicidality.**”

“We are going to **gradually reduce your dose** of opioid over time. I know that this will be hard for you and that it is frightening. My team and I will work with you and **be here for you as we make this change.** We will offer a variety of resources and treatments to help with your pain and to help you cope with this change in your treatment plan. I am confident that **this is the right choice for you and that you will be safer and better when we complete this process.**”

### References:

Covington EC, Argoff CE, Ballantyne JC, Cowan P, Gazelka HM, Hooten M, *et al.* Ensuring patient protections when tapering opioids: Consent Panel recommendations. *Mayo Clin Proc.* 2020;95(10):2155-2171.



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