July 7th, 2019

The Society of Pain and Palliative Care Pharmacists (SPPCP) is aligned with the National Academy of Medicine's (NAM's) Action Collaborative on Countering the U.S. Opioid Epidemic.

SPPCP is an organization dedicated to promoting exceptional patient care by advancing pain and palliative care pharmacists through education, development, and research in collaboration with the transdisciplinary team. Specifically, we encourage optimization of pharmacotherapeutic options, promoting best practices in pain and palliative care, and supporting quality of life. As a group, we support patient-centered transdisciplinary pain and palliative care teams with the pharmacist as an integral member of the team.

We believe that education among various healthcare providers is key. Pharmacists specializing in pain management and palliative care have much to offer and provide expertise in rational polypharmacy that can enhance outcomes. We are staunch supporters of advancing access to pharmacists in the complex environment of opioid therapeutics by urging Congress, state governments, and managed care organizations to recognize pharmacists as providers. This could bolster side-by-side collaboration with other healthcare practitioners within outpatient clinics and various inpatient institutions to enhance safety for patients requiring opioids alone or combined with other medications. This, of course, is well-aligned with the NAM initiative. Furthermore, pharmacists need to play a larger role as a rule, rather than the exception, in directly assessing risks for opioid-induced respiratory depression, monitoring complex patients, and mitigating various opioid risks.

Services that pharmacists should and could provide more ubiquitously with non-pharmacist healthcare colleagues include but are not limited to safe and reasonable opioid tapers, appropriate counseling, navigating various opioid side effects and offering effective interventions, advanced pharmacotherapeutic monitoring and appropriate interventions, toxicology monitoring, pharmacogenomic optimization, pharmacokinetic dose adjustments proportionate with changing hepatic and renal function, complex drug interaction assessment
and associated risk management, cost-optimization, medication-assisted treatment with buprenorphine, and initiation of various prescriptions including naloxone for in-home use.

We embrace the “National Call for Commitment Statements on Countering the U.S. Opioid Epidemic” and support any and all activities that foster collaboration among our pain management and behavioral health partners in all fields of medicine.

Commensurate with our mission, the ultimate goal is to improve patient outcomes, functionality, and safety. We agree with NAMs national collaborative that it takes an entire neighborhood of expertise from various fields of medicine to positively impact the ongoing complexities of opioid therapy for those that require these drugs and need access to such therapies. At the same time, we recognize the risks of opioids, and the balance needed among lawmakers, patients requiring long-term opioid therapy, and the necessity for improved access and support to patients with an underlying opioid use disorder that requires appropriate access to excellent behavioral support and acceptable medication assisted treatments.