

1.1.8.5. Opioids

Table 7: Summary of evidence: Opioids: Review Finding 1

Study design and sample size		Findings	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Information on safety and risks, including addiction, dependence, tolerance and withdrawal					
5	Semi-structured interviews and thematic analysis (5 studies)	People expressed concerns about addiction, tolerance, dependency and withdrawal but wish they had been provided with more information by their health care professional	Limitations	Very minor concerns about methodological limitations ^a	HIGH
			Coherence	No concerns about coherence	
			Relevance	Minor concerns about relevance ^b	
			Adequacy	No concerns about adequacy	

- (a) Five studies with very minor to moderate issues due to recruitment methods introducing potential bias (including highly selective sampling, small sample size and participants responding to an advertisement)^{319, 94, 487, 134, 206} and the potential influence of the researcher on the findings not being discussed²⁰⁶
- (b) One study with moderate concerns of applicability due to population with over-the-counter opioid addictions, not NHS opioid prescriptions⁹⁴, one study with minor concerns due to participants being taken solely from an RCT with different aim/design⁴⁸⁷, three studies with very minor or no concerns^{319, 134, 206}

Table 8: Summary of evidence: Opioids: Review Finding 2

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Information on appropriateness of medication and lack of alternatives					
3	Semi-structured interviews and thematic analysis (3 studies)	Information and reassurance that there were no better treatment options were seen as important for people starting or continuing opioid medication.	Limitations	Minor concerns about methodological limitations ^a	HIGH
			Coherence	No concerns about coherence	
			Relevance	Very minor concerns about relevance ^b	
			Adequacy	Very minor concerns about adequacy ^c	

- (a) Three studies with very minor or minor limitations due to recruitment (due to the majority of the sample consisting of people recruited in a clinical trial and as the paper reported being biased towards people interested in nonmedication pain management options)³¹⁹, or inadequacy or lack of detail about data analysis^{244, 487}
- (b) One study with no concerns about relevance, two studies with very minor concerns due to participants being taken from a different trial⁴⁸⁷, one of which was more focussed on non-medical pain management³¹⁹
- (c) Very minor concerns about adequacy due to the research finding being supported by three studies

Table 9: Summary of evidence: Opioids: Review Finding 3

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Pain management education					
2	Semi-structured interviews and thematic analysis (1 study), focus groups with interviews and thematic analysis (1 study)	Education around how to manage pain is important for people who are taking or tapering opioid treatments and can help avoid opioid misuse.	Limitations	Minor concerns about methodological limitations ^a	HIGH
			Coherence	No concerns about coherence	
			Relevance	Very minor concerns about relevance ^b	
			Adequacy	Minor concerns about adequacy ^c	

- (a) Two studies with minor concerns due to unclear or inadequate data analysis (data discarded; Wilson 2018⁴⁸⁷), unclear role of the researcher and minor possibility of selection bias¹⁶³
- (b) One study with minor concerns about relevance due to participants being taken from an RCT and whom all had eventually developed opioid use disorder ⁴⁸⁷
- (c) Minor concerns about adequacy due to research finding being supported by only two studies

Table 10: Summary of evidence: Opioids: Review Finding 4

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Realistic expectations of what health care professionals can provide					
1	Open-ended interviews supplemented by observations (1 study)	Health care professionals described that patients needed to set a realistic expectation of opioid treatments and what their GP could do to help manage their pain.	Limitations	Minor concerns about methodological limitations ^a	LOW
			Coherence	No concerns about coherence	
			Relevance	Minor concerns about relevance ^b	
			Adequacy	Serious concerns about adequacy ^c	

(a) One study with minor concerns about methodological limitations due to unclear statement of findings ⁴⁶⁸

(b) One study with minor concerns about relevance due to sample being limited to clinicians caring for people of lower socio-economic status.

(c) Serious concerns about adequacy due to research finding being based on one study, with unclear statement of findings

Table 11: Summary of evidence: Opioids: Review Finding 5

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Communicating rationale for dose changes					
1	Secondary analysis of semi-structured interviews and qualitative content analysis (1 study)	Explaining the rationale for opioid dose changes was seen as important by health care professionals who could sometimes be met with anger when altering opioid prescriptions.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

(a) One study with minor limitations due to unclear role of the researcher ⁴⁹²

(b) Moderate concerns about adequacy due to research finding being based on only one study

Table 12: Summary of evidence: Opioids: Review Finding 6

Study design and sample size		Findings	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Importance of adherence					
1	Secondary analysis of semi-structured interviews and qualitative content analysis (1 study)	Health care professionals highlighted the importance of patients knowing the expectations on them to adhere to their opioid treatment plan.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

(a) One study with minor limitations due to unclear role of the researcher ⁴⁹²

(b) Moderate concerns about adequacy due to research finding being based on only one study

Table 13: Summary of evidence: Opioids: Review Finding 7

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Information on impact on mood after cessation					
1	Focus groups with thematic analysis (1 study)	People expressed concern about worsening mood after cessation.	Limitations	Very minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

(a) One study with very minor limitations due to role of researcher not being discussed¹⁴²

(b) Moderate concerns about adequacy due to research findings being based on only one study

Table 14: Summary of evidence: Opioids: Review Finding 8

Study design and sample size		Findings	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Sources of support					
4	Semi-structured interviews and thematic analysis (4 studies)	Several sources of support were identified, with peer support the most valuable to patients (with preference for online peer support groups).	Limitations	Very minor concerns about methodological limitations ^a	HIGH
			Coherence	No concerns about coherence	
			Relevance	Minor concerns about relevance ^b	
			Adequacy	No concerns about adequacy	

- (a) Four studies with minor or very minor issues due to recruitment methods introducing potential bias (including highly selective sampling, small sample size and participants responding to an advertisement) or unclear role of the researcher ^{134, 319, 94,507}
- (b) One study with moderate concerns of applicability due to population with over-the-counter opioid addictions, not NHS opioid prescriptions⁹⁴, three studies with very minor or no concerns ^{134, 319, 507}

Table 15: Summary of evidence: Opioids: Review Finding 9

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Relationship with health care professionals					
4	Semi-structured interviews and thematic analysis (3 studies), focus groups with interviews and thematic analysis (1 study)	A positive relationship with a health care professional was key to successful tapering of opioids; this includes being supportive, non-judgemental, flexible and accessible.	Limitations	Very minor concerns about methodological limitations ^a	HIGH
			Coherence	No concerns about coherence	
			Relevance	Minor concerns about relevance ^b	
			Adequacy	No concerns about adequacy	

(a) Four studies with very minor or minor issues due to potential selection bias or inadequate analysis ^{94,134, 163, 487}

(b) One study with moderate concerns of applicability due to population with over-the-counter opioid addictions, not NHS opioid prescriptions ⁹⁴, three studies with very minor or no concerns ^{134, 163, 487}

Table 16: Summary of evidence: Opioids: Review Finding 10

Study design and sample size		Findings	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Support in decision making					
1	Semi-structured interviews with thematic analysis (1 study)	A lack of information from health care professionals on new medications and adverse effects were identified.	Limitations	Very minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

(a) One study with very minor limitations due to role of researcher not being discussed ¹⁰⁶

(b) Moderate concerns about adequacy due to research findings being based on only one study

Table 17: Summary of evidence: Opioids: Review Finding 11

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Need for empathy/acknowledgement of pain					
1	Semi-structured interviews with thematic analysis (1 study)	The invisibility of the pain often led to long waiting times and delays in appropriate diagnosis and treatment and a lack of empathy from family.	Limitations	Very minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

(a) One study with very minor limitations due to role of researcher not being discussed¹⁰⁶

(b) Moderate concerns about adequacy due to research findings being based on only one study

Table 18: Summary of evidence: Opioids: Review Finding 12

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Support in cessation/tapering					
1	Focus groups with thematic analysis (1 study)	Some patients had been discouraged from quitting whilst others had been coached or supported through the process.	Limitations	Very minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

(a) One study with very minor limitations due to role of researcher not being discussed ¹⁴²

(b) Moderate concerns about adequacy due to research findings being based on only one study

Table 19: Summary of evidence: Opioids: Review Finding 15

Study design and sample size		Findings	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Need for tailored support					
2	Semi-structured interviews and thematic analysis (1 study), focus groups with interviews and thematic analysis (1 study)	Patients identified a need for more tailored support which specifically addresses a person's needs, stemming from open discussion with their health care professional.	Limitations	Minor concerns about methodological limitations ^a	HIGH
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Minor concerns about adequacy ^b	

(a) Two studies with minor limitations due to unclear role of the researcher and lack of detail or inadequate data analysis^{507, 163}

(b) Minor concerns about adequacy due to research finding being supported by only two studies

Table 20: Summary of evidence: Opioids: Review Finding 14

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Multimodal care and coordination between providers					
1	Semi-structured interviews and thematic analysis (1 study)	Patients identified a need for better coordination between the primary care clinician and other specialists involved in their care.	Limitations	Ver minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Minor concerns about adequacy ^b	

(a) One study with very minor limitations due to mostly information not relevant to the review ³⁹⁸

(b) Minor concerns about adequacy due to research finding being supported by only one study

Table 21: Summary of evidence: Opioids: Review Finding 15

Study design and sample size		Findings	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Emotional support					
2	Semi-structured interviews and thematic analysis (1 study), focus groups with interviews and thematic analysis (1 study)	Emotional support was seen as important to address the emotional distress that can result from opioid use, rather than focussing solely on physical symptoms.	Limitations	Minor concerns about methodological limitations ^a	LOW
			Coherence	No concerns about coherence	
			Relevance	Moderate concerns about relevance ^b	
			Adequacy	Minor concerns about adequacy ^c	

- (a) Two studies with minor or very minor limitations due to unclear role of the researcher and lack of detail or inadequate data analysis ^{151, 163}
- (b) One study with serious limitations due to the study being conducted in the USA, reportedly at a time of increasing pressures on providers to reduce opioid doses and on patients who were receiving care from an integrated delivery system as Kaiser Permanente Northwest location health plan members, who may not share the same views to people in primary care in the UK, and due to recruitment of participants whose pain interference score suggested that opioid treatment was not fully successful in managing their pain who may hence hold different views to patients whose opioid treatment has been successful ¹⁵¹
- (c) Minor concerns about adequacy due to research finding being supported by only two studies

Table 22: Summary of evidence: Opioids: Review Finding 16

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Family support					
1	Semi-structured interviews with thematic analysis (1 study)	Family support was considered essential when dealing with chronic pain	Limitations	Very minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

(a) One study with very minor limitations due to role of researcher not being discussed ¹⁰⁶

(b) Moderate concerns about adequacy due to research findings being based on only one study

Table 23: Summary of evidence: Opioids: Review Finding 17

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
GP supervision					
1	Semi-structured interviews with thematic analysis (1 study)	GP supervision of opioid prescription and intake was seen as a key role of support, with less supervision associated with increased chance of dependency and GP engagement with a reduced likelihood of harm occurring.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

- (a) One study with moderate limitations due to recruitment (majority of participants contacted the researchers if they wanted to take part, possibly making them more motivated to give stronger or more negative views) and the potential influence of the researcher on the findings not being discussed ²⁰⁶
- (b) Moderate concerns about adequacy due to research findings being based on only one study

Table 24: Summary of evidence: Opioids: Review Finding 18

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Role of pharmacists					
1	Semi-structured interviews with thematic analysis (1 study)	People often prefer to go to pharmacists rather than their GP for ease and speed of prescription, which can limit the support and information they receive.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy ^b	

- (a) One study with moderate limitations due to recruitment (majority of participants contacted the researchers if they wanted to take part, possibly making them more motivated to give stronger or more negative views) and the potential influence of the researcher on the findings not being discussed ²⁰⁶.
- (b) Moderate concerns about adequacy due to research findings being based on only one study.

Table 25: Summary of evidence: Opioids: Review Finding 19

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Findings	Criteria	Rating	Overall assessment of confidence
Referral to specialists					
1	Telephone interviews and thematic analysis (1 study)	People described referral to specialist drug and alcohol services as a positive supportive experience, but that these services were not always suited for OTC addiction.	Limitations	Very minor concerns about methodological limitations ^a	LOW
			Coherence	No concerns about coherence	
			Relevance	Moderate concerns about relevance ^b	
			Adequacy	Moderate concerns about adequacy ^c	

(a) One study with very minor limitations due to unclear role of the researcher and data analysis ⁹⁴

(b) One study with moderate concerns about relevance due to a focus on addiction to over-the-counter medications and exclusion of people addicted to only NHS prescribed opioids⁹⁴

(c) Moderate concerns about adequacy due to research findings being based on only one study

Table 26: Summary of evidence: Opioids: Review Finding 20

Study design and sample size		Findings	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Help accessing benefits					
1	Open-ended interviews supplemented by observations (1 study)	Poverty can be a barrier to healthcare and clinicians can help patients obtain health and financial benefits.	Limitations	Minor concerns about methodological limitations ^a	LOW
			Coherence	No concerns about coherence	
			Relevance	Minor concerns about relevance ^b	
			Adequacy	Serious concerns about adequacy ^c	

(a) One study with minor concerns about methodological limitations due to unclear statement of findings ⁴⁶⁸

(b) One study with minor concerns about relevance due to sample being limited to clinicians caring for people of lower socio-economic status.

(c) Serious concerns about adequacy due to research finding being based on limited information from one study.