

# Aberrant Drug Use Behaviors

## ALERT

**Working with patients who persistently ask for medication has been identified as a significant risk factor for exposure to workplace violence.<sup>3</sup>**

**An intoxicated patient may exhibit unsafe, dangerous, or altered behaviors. All staff members should know the organization's practice regarding deescalation and the use of additional personnel in a behavioral emergency.**

**Never dispense or administer controlled substances outside the scope of professional nursing practice or in the absence of a formal practitioner-patient relationship.<sup>1</sup>**

## OVERVIEW

Patients may exhibit aberrant drug use behaviors for several reasons, including to seek relief from pain or a painful medical condition or to satisfy a drug addiction or dependence. Aberrant drug use behaviors include frequently visiting the emergency department (ED) or a practitioner's office with complaints of unremitting headache, back pain, or dental pain; requesting opioids or a specific medication by name for pain relief; and reporting that a prescription medication was lost or stolen.<sup>6</sup> In addition, patients with psychiatric illness may self-medicate with drugs and alcohol rather than or in addition to taking prescribed psychotropic medication. To obtain medication, the patient may become persistent, manipulative, and demanding. Medication names and doses may be indicated by the patient with specificity.<sup>6,9</sup>

Drug dependence, abuse, or addiction can be the driving force in aberrant drug use behavior,<sup>5</sup> as can relief-seeking for patients with pain.

- *Drug dependence* means that a person needs a drug to function normally; stopping the drug suddenly may lead to withdrawal symptoms and possibly a medical emergency.
- *Drug addiction* is a chronic disease that involves a person experiencing a craving for a substance and having an inability to control use despite negative consequences.

Treatment engagement and positive outcomes depend on factors that influence patient motivation and readiness to change.<sup>7</sup>

Nurses in all areas of clinical practice may work with patients exhibiting aberrant drug use behaviors, so the ability to recognize these behaviors and determine appropriate clinical actions is important. Patient-centered care that incorporates compassion and acceptance improves patient and nurse interactions and outcomes.<sup>2</sup>

When working with a patient exhibiting aberrant drug use behaviors, the nurse should remain nonjudgmental and empathic. A nurse who exhibits negative feelings and behaviors toward the patient will be perceived as judgmental and is more likely to affect the patient negatively. Forging a professional, therapeutic relationship is essential for patient engagement and cooperation with the nursing assessment, including gaining crucial information about a patient's use of prescription, over-the-counter, and illegal drugs.

## STRATEGIES

1. Introduce yourself to the patient.
2. Perform hand hygiene before patient contact.
3. Verify the correct patient using two identifiers.
4. Perform a thorough evaluation of the patient, including a history of medical, psychiatric, and pain conditions.
5. Obtain a thorough medication history, including prescription, over-the-counter, and other drugs; if possible, determine dosages and the prescriber's name.
6. Assess the patient for increased risk for suicide.
7. Assess the need for a psychiatric practitioner consult and seek a consult as appropriate.
8. Make sure that all medications and prescriptions are secure at all times.
9. Perform a self-assessment and self-inventory of personal values and beliefs regarding drug use and drug addiction.
10. Treat the patient with respect and empathy during all interactions. Avoid blame and judgmental attitudes and behaviors.<sup>8</sup>
11. Become familiar with the evidence that abuse of prescription and controlled substances crosses all socioeconomic lines and that family members as well as peers in the health care professions may be affected.<sup>5</sup>
12. Consider the current evidence related to the health effects of abusing prescription drugs, especially controlled substances. **Opioids and benzodiazepines are the most commonly abused prescription medications.**<sup>1</sup>
13. Understand the concepts of addiction, substance use, and substance abuse and issues encountered when working with patients with substance use problems.
14. Keep up to date on the organization's practices for working with persons exhibiting aberrant drug use behaviors, including colleagues and organization staff members. Focus on reducing stigma while creating an environment that supports harm reduction.
15. Understand the concept of relief seeking and the ethical issues for practitioners when managing pain (e.g., trying to avoid undermedicating and overmedicating).<sup>4</sup>
16. Know the organization's chain of command with regard to obtaining assistance when aberrant drug use behavior is suspected or confirmed.
17. Maintain patient and staff safety when working with patients who are seeking drugs. Initiate interventions to address the potential for patient violence, including staff training in the identification of risk factors as well as methods to intervene proactively to prevent and manage patient aggression.<sup>3</sup>
18. Know the most commonly abused classes of prescription drugs as well as their indications and the specific drug names.<sup>9</sup>
19. Know the legal and ethical responsibilities under the state nurse practice act for reporting a suspicion or actual knowledge of illegal activities related to the prescribing or misuse of prescription drugs.
20. Identify and describe the patient's potentially aberrant drug use behaviors.<sup>6</sup>
21. Document all complaints of somatic discomfort in the patient's chart and reevaluate during treatment.
22. Follow the organization's practice and safety procedures when drug abuse or misuse is suspected.
23. Assess, treat, and reassess pain.
24. Perform hand hygiene.
25. Document the strategies in the patient's record.

Author: Carol Baxter, RN, MSN, CNS, APN

Clinical Review: Loraine Fleming, DNP, APRN, PMHNP-BC

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## REFERENCES

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