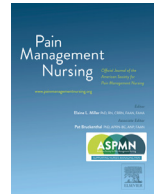




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American Society for Pain Management Nursing and Hospice and Palliative Nurses Association Position Statement: Pain Management at the End of Life

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ABSTRACT

Fundamental to the quality of life is assisting patients in relieving pain including at the end of life. Compassionate, effective, evidence-based pain care for the dying improves the quality of life for patients and may reduce distress and complicated bereavement in the loved ones witnessing this death. However, efforts designed to mitigate the consequences of the opioid epidemic have seriously compromised pain care at the end of life. This has created an urgent need to focus on the barriers to relief, and solutions necessary to provide safe and effective pain and symptom management in this population. To that end, a committee of experts was convened by the American Society for Pain Management Nursing and the Hospice and Palliative Nursing Association. These experts reviewed the current literature, developed a draft position statement which underwent consecutive revisions. This statement was then endorsed by the respective organizations. Elucidation of barriers to effective pain control in advanced disease allows targeted interventions; including those related to clinical care, education, accessibility, and research. As nurses, we must continuously advocate for humane and dignified care, promoting ethical, effective pain and symptom management at the end of life for all.

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Issue Addressed

All nurses must continuously advocate for and deliver safe and effective pain management for those individuals with a serious illness and a prognosis of days to months of life.

Background of Issue

Pain management is essential from the time of diagnosis of a serious illness and throughout the disease trajectory. Unfortunately, the prevalence of inadequately controlled pain occurring in those with serious illness remains unacceptably high. In most cases, pain experienced by people with advanced disease can be prevented or

relieved through optimal care, yet studies reveal that patients continue to experience uncontrolled pain in the final weeks, days, and hours of their lives. Barriers to adequate pain relief include those associated with the patient and family, healthcare providers, and the healthcare system. Nurses have the ethical responsibility to use evidenced based, effective therapies while advocating for humane and dignified care on behalf of patients and their loved ones. Recommendations for nurses, prescribers, and healthcare systems include clinical care, education, accessibility, and research needs.

Position Developed, Recommended, Adopted, or Affirmed

The American Society for Pain Management Nursing (ASPMN®) and Hospice and Palliative Nurses Association (HPNA) endorse the position that all nurses and other healthcare professionals must advocate for effective, efficient, and safe pain and symptom management to alleviate suffering at end of life. This must be pro-

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vided regardless of the patient's age, disease, history of substance use disorder, socioeconomic status, payor coverage, or site of care (Dalal & Bruera, 2019; Fitzgerald Jones et al., 2022; Hagarty et al., 2020; Lowry, 2022). Pain assessment in this population must be thorough, ongoing, and evidenced based, as some patients with advanced disease cannot verbalize their discomfort. Opioids remain an essential component of excellent pain control during end of life (Duran-Crane et al., 2019; Paice et al., 2023 submitted for publication; Swarm et al., 2019). Unfortunately, barriers to pain control have increased, in part due to actions designed to address the public health epidemic of opioid misuse and overdose deaths. Patients and families describe experiencing stigma when acquiring and using these medications (Bulls et al., 2022). Nurses report fear of hastening death, causing addiction, or facing legal or licensing consequences; along with inadequate knowledge and education regarding pain management for people at end of life (Gerber et al., 2022). Institutional barriers include inadequate staffing, leading to time constraints and challenges in communication across teams. Prescribers can be limited by regulatory policies, and report fear and pressure to prescribe less. Restrictive scope-of-practice laws in some states limit the services advanced practice providers can deliver, including prescribing opioids. Insurers have placed obstacles such as limited formularies, burdensome prior authorizations, and frequent denials in payment. Supplies of opioids are often compromised by shortages, and many retail pharmacies decline to carry or dispense these medications (Bao et al., 2022; Borders et al., 2021; Brown et al., 2020; Heung et al., 2023; Swarm et al., 2019; Zhang et al., 2021). As a result, the provision of opioids has decreased for people with serious illness with advanced disease, supporting fears that pain management at end of life is declining (Enzinger et al., 2021).

To overcome existing obstacles and achieve humane, dignified pain care at the end of life, the following are recommended:

Assure evidence-based education for healthcare providers that leads to improved pain management for patients at end of life including.

- Awareness of the essential role of comprehensive and ongoing pain and symptom assessment and management in all patients; in particular, the patient who is nonverbal during the dying process.
- Recognition of the need for different routes of medication administration during the dying process.
- Accountability of all healthcare professionals to support the patient's and family's wishes and goals.
- Emphasis on effective, efficient, safe, and multimodal pain management plans and outcomes that are derived from a comprehensive assessment that includes awareness of and monitoring for substance use disorder.
- Availability of an educated work force in adequate numbers to provide safe and effective pain and symptom management care at end of life.

Ethics and education

- Acknowledgment of pain management as a core healthcare value and a human right.
- Acceptance of all patient-reported pain as worthy of being treated.
- Educating the public regarding barriers to pain management at end of life, the harmful effects of pain, and the importance of appropriate and safe pain management.
- Professional and public education that the national response to the opioid crisis does not negate the ethical responsibility to relieve pain and suffering.

Accessibility to care

- Accessibility to the most effective pharmacologic and nonpharmacologic treatments for each patient, including opioids.
- Access to early care integration with interdisciplinary palliative care teams, and referral to hospice when appropriate.
- Accessibility to specialists in pain, palliative care, and substance use disorder specialists for pain and symptom relief, when indicated.
- Advocacy to address legal, legislative, regulatory and healthcare reimbursement obstacles to effective pain relief.

Research

- Ongoing research in pain and symptom management in serious illness, particularly during end of life.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Approval Dates

Approved by the ASPMN Board of Directors October 2023
Approved by the HPNA Board of Directors January 2024

ASPMN Mission Statement

The American Society for Pain Management Nursing's mission is to advance and promote optimal nursing care for people affected by pain by promoting best nursing practices. This is accomplished through education, standards, advocacy, and research.

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