

Compass Opioid Stewardship in Practice

Microlearning Series

Module 16: Managing Opioid Risk and Transitioning to Buprenorphine (Part 2)

Welcome to Compass Opioid Stewardship in Practice. Each week, our Compass coaches will explore a real-world case, define a clinical goal, and walk through practical strategies to improve care. Whether you're tuning in via video, audio, or reading the summary, this session is built for busy clinicians like you.

This week's session is brought to you by Dr. Rachael Duncan, PharmD, BCPS, BCCCP; Clinical Coach in the Compass Opioid Stewardship Program.

Case Presentation

Mary is a 67-year-old woman with chronic pain, diabetic neuropathy, and depression, anxiety, and insomnia. She uses opioids, benzodiazepines, and other medications, and occasionally drinks alcohol to help with sleep.

Goal

To explore adjustments to her current medication regimen to optimize risk:benefit ratio.

Achieving our Goal

Optimize medications for both mood and pain:

- When patients have co-occurring depression and neuropathic pain, consider whether switching from an SSRI to an SNRI may improve both conditions. If appropriate, use a gradual cross-taper approach and monitor for effectiveness and tolerability.

Address insomnia with evidence-based, nonpharmacologic approaches:

- Educate patients on the strong connection between sleep and chronic pain. Recommend cognitive behavioral therapy for insomnia (CBT-I) as a first-line treatment and provide information on accessible online programs or local resources.

Reduce reliance on alcohol or high-risk sedatives for sleep:

- Reinforce that alcohol and certain sedating medications increase the risk of respiratory depression when combined with opioids. Discuss safer alternatives and long-term strategies for improving sleep.

Evaluate benzodiazepine use and consider safer strategies:

- If patients are taking benzodiazepines regularly, assess readiness to taper. When appropriate, consider structured taper plans, longer-acting alternatives to support tapering, or non-benzodiazepine medications for short-term symptom support.

Recommend behavioral health and pain psychology support:

- Referral to psychotherapy or pain psychology can help patients develop coping skills for chronic pain, anxiety, depression, and insomnia while improving overall function and self-management.

Review the impact of opioid therapy on mood and sleep:

- Discuss how long-term opioid use may affect sleep quality and emotional health. Explore whether alternative pain treatments or opioid rotation may improve overall outcomes and reduce safety risks.

Consider safer medication options when appropriate:

- Evaluate whether transitioning to medications with improved safety profiles and potential benefits for neuropathic pain or mood may be appropriate. Provide educational materials to support informed, shared decision-making.

Use motivational, patient-centered communication:

- Assess readiness for change and introduce adjustments gradually. Provide clear education and take-home resources so patients feel informed and prepared for future treatment changes.

Clinical Pearls

The clinical pearls we want you to remember are:

- Review medication lists for potential optimization opportunities by looking at agents that may be appropriate for multiple conditions.
- Identify medications that may be becoming more risky as Mary ages, and offer alternative therapies.
- Make sure you have several options to present to a patient, empowering them to make the choice in how they want to proceed next in their care.
- Provide education and handouts on new therapies or medications that may be more beneficial for the patient.
- Use your motivational interviewing skills to prep patients for future changes in therapy.

The Compass OPSS program provides clinical protocols, dosing calculation support through our pharmacists, and patient education tools to help guide transitions. For more personalized technical assistance on this topic, we encourage you to reach out to your Clinical Coach to schedule a coaching session.

Thank You

This education has been brought to you through the generous support of the Centers of Medicare and Medicaid Services. Thanks for reading this week's Compass Opioid Stewardship in Practice Microlearning Series. Thank you for being part of the Compass Opioid Stewardship Program. And thank you for all you do caring for your patients.

Resources

- [Opioid Risks and Side Effects](#)
- [Risk Management: Putting it All Together](#)
- [Recommended Screening Tools for Pain and Opioid Risk Management](#)