Improving The Delivery Of Safe And Effective Breakthrough Analgesia In A Hospice Setting

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BACKGROUND: Pain in the palliative care setting typically consists of persistent background pain, associated with transient episodes of more severe pain. When this occurs in a patient whose background pain is well controlled, it is termed breakthrough pain. Effective medicines exist for the management of breakthrough pain. However, a pre-requisite for their safe and effective use in an individual patient is the accurate assessment of the drugs' effects in that person.

THE PROBLEM: Despite the availability of effective treatments, anecdotally, we have found that their use sometimes fails to yield adequate breakthrough analgesia. We suspected that this was often related not to the drugs' pharmacological properties, but to the processes that surrounded their prescription and administration. Most notably, the supporting documentation in our hospice did not allow for the effects of treatment to be recorded. This impaired our ability to administer these drugs in a safe and effective manner. It also presented a barrier to effective audit and evaluation of our practice.

THE INTERVENTION: Pilgrims Hospice, Margate, is an 18-bed specialist inpatient and outpatient palliative care unit. We designed a chart for the documentation of drugs administered in the treatment of breakthrough pain. To complement this, we adapted a pain assessment tool, in which the type, site, and severity of the pain could be accurately defined. Used together, these documents allowed a precise and detailed record of the effects of drug treatment to be maintained.

EFFECT OF THE INTERVENTION: Take-up of the intervention, in patients requiring breakthrough analgesia, was good. It was positively received by both nursing and medical staff. Measured subjectively, the intervention was found to inform and enhance day-to-day practice in relation to the prescription and administration of breakthrough analgesia. It also provided clear documentation to facilitate future audit and service evaluation.

PROPOSALS FOR FUTURE PRACTICE: This intervention is currently being piloted within this hospice and, if successful, it is proposed that it will be adopted this as a standard component of care for patients requiring breakthrough analgesia. Following the acquisition of experience in its use, supported by necessary audit and service evaluation data, it will be considered for further roll-out across the three Pilgrims Hospices sites.