

Opioid Use and Risks: A Practical Approach to Harm Reduction in Older Adults

I am grateful for the recent opportunity to attend and also present at the March 15th Opioid Misuse and Older Adults conference, organized by [Lifespan](#) and the [Institute for Innovative Education](#) at the University of Rochester. Monroe County has experienced a nearly tenfold increase in opioid-related deaths over the past few years. As the circumstances of these deaths have been studied, there has arisen an awareness that our community could benefit from education that is specifically focused on older adults. The time is now!



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The conference speakers guided learners toward a deeper understanding of the unique aspects of older adult alcohol and drug use. The life changes of older adults such as retirement, chronic illness and pain, anxiety and social isolation can increase risky use of drugs and alcohol. When older adults are in psychological and/or physical discomfort and have access to alcohol or are prescribed opiates, the temporary relief that the substances offer may lead to unsafe use. As well, some older adults have been using drugs and alcohol for many years (remember the 1960s) and as they age, their slower metabolism and poorer health can make continued use of those substances riskier. The Centers for Disease Control (CDC) has created a guideline for prescribers to assist them with the challenge of treating the pain of older adults while also minimizing their risk. [12 recommendations for opioid prescribing](#)

My contribution to the conference provided guidance for our conversations about drug and alcohol use with older adults. I focused on integrating the principles of trauma responsiveness (safety, trust, collaboration, empowerment, and choice) into a Motivational Interviewing “way of being.” I emphasized that the way in which we talk with older adults can substantially influence their personal motivation for risk reduction and behavior change. As well, our perception of the older adult will influence how we treat them. When we acknowledge the older

adult's right and freedom not to reduce risk/change and we honor their autonomy, it sometimes makes change possible. Older adults have years of experience and wisdom. As with all of us, they **are** the experts about themselves and the events of their life. By fully listening and eliciting what is important to them and how they would like to see their life change, that change is more likely to happen.

The conference closed with two very important topics:

- The first of these was a discussion about the use of medications such as Suboxone as treatment for those older adults who have become dependent on opiates. Research has substantiated the effectiveness of prescribing these medications while also offering support and other therapies specially created for older adults.
- The conference closed with the second experiential opportunity to understand opioid overdose prevention and the use of Narcan. All attendees were offered the opportunity to participate in the training and receive a Narcan kit.

I found this conference provided guidance and hope and left us understanding that we are able to minimize the harm of alcohol and drug use in older adults.

Cheryl is currently working as an Integrated Health Trainer and Clinical Consultant for Coordinated Care Services, Inc. where she has developed curriculum and provided training and/or coaching for health care providers, schools, human services and criminal justice on a variety of topics including: motivational interviewing (MI), SBIRT, trauma and trauma responsive services, person-centered planning, parenting, co-occurring disorders, and substance use disorders. Cheryl is a NYS OASAS Motivational Interviewing (MI), Clinical Supervision Foundations II and SBIRT trainer. She has been a member of Motivational Interviewing Network Trainers (MINT) since 2004 and a Motivational Interviewing Assessment Supervisory Tools for Enhancing Proficiency (MIA: STEP) trainer for the NIDA Blending Initiative. Cheryl Martin has a BSN in Nursing, MA in Psychology and over 40 years of experience as an RN. Her nursing experience includes 13 years in surgery and medicine as well as 27 years in behavioral health. She earned a Trauma Certificate from the University of Buffalo, School of Social Work and is also a Certified Alcoholism and Substance Abuse Counselor. Cheryl can be reached at cmartin@ccsi.org.