

Substance abuse among healthcare professionals



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“ Statistically, about 10-15 of you have or will develop a substance use disorder” (Welsh 2002). This quote is stated by Christopher J. Welsh, M. D. to a group of healthcare providers during a substance abuse lecture. He is reinforcing the fact of how likely a healthcare worker can get into the habit. Substance abuse can include, but is not limited to, alcohol, narcotics, benzodiazepines and illegal drugs. It is not officially known why the abuse is so common in this specific group but it can be easily assumed that knowledge, access, and psychological issues would play a huge part. According to Dr. Welsh, the reasoning behind not knowing why substance abuse is so prevalent is because the majority of healthcare workers strongly object to the idea that they are addicted. In other words, they are in denial. There are two specific levels that drug users can divide themselves into: Abuse, which is the milder of the two, and dependence, which takes a more intense intervention and effort to cut the person of the habit. Since the focus of this paper is substance abuse that is the category that will be discussed. What exactly is considered abuse and how is it distinguished between an actual medical need? In Dr. Welsh’s lecture he mentioned four factors that are included. According to him at least one of these four factors must be accurate in order to be considered official abuse. These factors are: (1) A person is unable to complete social tasks in his or her life, (2) The consistent use of the drug in unsafe situations, (3) repeated drug affiliated legal offenses and (4) use of drugs even though it may cause social or interpersonal problems (Welsh 2002). For example, if a person is diagnosed with an anxiety disorder you may be prescribed Alprazolam. It is not considered abuse if you take your prescribed dose for oncoming anxiety while following the doctors instructions. When having an anxiety attack, or <https://assignbuster.com/substance-abuse-among-healthcare-professionals/>

other symptoms of anxiety, Alprazolam helps to relax the person and help them feel 'normal'. When using Alprazolam without anxiety it can give a 'drugged' feeling with symptoms such as severe drowsiness to the point of impairment (Epocrates). Therefore if you use the drug without anxiety in unsafe situations, such as driving, it is considered abuse. When a person uses a drug they do so with the intention of trying to make themselves feel better. This could be a major cause for the denial that they actually have a problem. Not every person realizes how it affects friends, family, and peers. Even more so, they do not realize how it affects their job. It would take most people a serious intervention in order to help them break the habit. In the topic of drug use in the Health care workforce three questions come to mind: Why is it so prevalent among this specific profession? What are the signs to show if/when you should involve yourself with the suspected abuser? And where is help provided for the substance abusers? These three questions will be discussed in the following paragraphs.

Why is substance abuse so prevalent in health care professionals? As mentioned above there are no precise facts as to why it is, because of the large percentage of people denying that what they do is considered abuse. Also mentioned above is that it can be assumed the reason can fall into at least one of the three categories: knowledge, access, and psychological factors. When a person works in healthcare they are exposed to a lot of basic information not commonly known outside of the healthcare facility, even if it is unintentional. An employee may hear and/or see how a patient is reacting to certain medications, such as morphine, see it is relaxing for the patient, then gain the knowledge that it is a medication that makes you 'feel good'.

On an even higher level, many healthcare workers are required, for their job, to know what a drug does, why it is being given to the patient, and what common and serious complications to monitor for. When a nurse is 'hands on' with the patient they become even more acquainted with the effects of the drugs. This can contribute to any future situation where the nurse may want to experiment. With this information at hand healthcare workers feel more comfortable using drugs and feel as if they can manage them better than the average person because of their knowledge. The access of drugs is a contributing factor as well. A nurse who works full time works at least 36 hours per week, giving him or her plenty of access to drugs. Although the new technology is making it harder to steal medications, it is still done. In addition to stealing nurses often time befriend doctors and could have doctors write prescriptions which allows even more access to drugs. Being a nurse, as mentioned above, requires knowledge of drugs and what they are used for. Because of this a nurse could make an appointment with her doctor, name specific symptoms, and know they will get a drug that they are seeking. Lastly, psychological factors contribute to substance abuse being so prevalent. Nurses and Physicians have extremely stressful jobs, and they may seek to alleviate their stress in drug form. According to a study done by Cicala (2003) 8-12% of physicians abused or became substance abusers and Trinkoff and Storr (1998) did a study only to find that 32% of the 4, 438 nurses being studied had some form of abuse. With all things considered, these are only including the healthcare individuals who admitted to having an abuse problem. Most of the drugs found to be used among the physicians were opioids and benzodiazepines while nurses had a wider variety and included illegal substances such as cocaine (Cicala 2003).

What are the signs to show if/when you should involve yourself with the suspected abuser? According to a study done by Samuel D. Uretsky, PharmD (2008), it is difficult to determine a drug abuser in the healthcare field because it is generally found the job is the last thing to be affected. He goes on to explain that families and social lives are first to be torn apart versus in the average non healthcare worker there are the early signs to look for: being consistently late or absent, slacking off on the job, etc. He also goes on to make a valid point of coworkers not noticing, or turning their shoulder away from signs of abuse because they may be friends or they just don't want to get involved. In an online government brochure it sets certain guidelines to determine if the suspected individual is an abuser. These guidelines include: change in attitude and appearance, " heavy wasting of drugs", relationships start to decline, more time than necessary spent near the drug supply, " insisting" on handling all injected narcotics, etc (Department of Justice). As a nurse we learn to follow the chain of commands. With this in mind it puts anyone at the predicament of being ' the rat'. No one wants to be the person who puts another person's license and career on the line. However, many patients are in the hands of drug abusers. When it doubt, or if making excuses for the potential drug abuser it, think if you would let a person of great importance to you be in the care of that specific healthcare worker. When suspecting a coworker of drug abuse you must, again, follow the chain of commands. Go to the charge nurse, or if it happened to be the charge nurse then go to the nurse manager. Most of the time, the employee will be approached by their superior and talked to about the obvious concerns. Many times this wakes them up to realize they

actually have a problem and immediate improvements are shown, however sometimes it takes more serious intervention (Department of Justice).

Where is help provided for the substance abusers? There are a range of different rehabilitation programs available all over the country and some specific to health care workers. In fact, there are some affiliations aimed at preventing substance abuse among healthcare workers. The Behavioral Health Research Center of the Southwest has started to develop programs to help prevent the abuse. The method of prevention is to send messages out in different forms and educate the prevalence. They are trying to influence this by making it a part of their health and wellness program. " Included in our campaign are messages delivered in educational videos and newsletters, health risk appraisals, and personal health coaching" (BHRCS 2007). This is all taking place in Albuquerque, New Mexico, but this is just the start of prevention. They hope to expand to health care workers around the country. The Interventional Project for Nurses, or IPN, has been created to assist nurses whose jobs may have been impaired or started to be impaired by drug use, alcohol use, or mental disorders. A nurse can place their own self in the program or can be placed in the program by their superior, or employer (IPN). Depending on where the individual works is the determining factor of what happens to the nurse, if caught being a substance abuser. The nurse could get as little as probation to as much as being fired in addition to losing their license. Either way, the program is there to help Nurses get back on their feet and get over their addiction.

As a recap, drug abuse is prevalent in healthcare although there is no factual information to determine why, it can only be assumed. There are many

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abusers all around you as you work in the healthcare field and most go unnoticed. Their signs and symptoms are not the same as the average drug abuser and their work tends to be the last thing severely affected, making it more difficult to determine the abusers. If drug abuse is suspected it is an obligation as a licensed nurse to report it in the chain of commands, which in the long run will benefit the bigger picture. Being a drug abuser is a hard situation which may seem to have a dead end, however there are many rehabilitation programs focused on health care workers and at least one large affiliation focusing specifically on Nurses. Although it seems common sense that abusing drugs is wrong, it does not happen overnight. A person may find relief with a drug and start to use it without it thinking of long term effects. They may casually use it once and a while, and then increase it to more often, and then very frequently. Being educated on drug abuse, before stepping foot into the real world of nursing, helps to be prepared through primary prevention. Drug abuse, though hard to determine has a huge impact on our health care system as a whole and needs to be remedied. It is progressively improving, however only baby steps. This isn't a perfect world and not everyone can be helped, however, every person you help is one step in the right direction for our future.

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