



College of
Physicians
& Surgeons
of Alberta



AGREEMENT IN PRINCIPLE

Alberta's Care Plan for Chronic Pain Patients on Long-Term Opioid Therapy

October 18, 2019

Signatories: College of Physicians and Surgeons of Alberta, HELP Alberta's Pain, Alberta Medical Association Section of Chronic Pain and the Pain Society of Alberta

Topic: **"Creating a comprehensive care plan for prescribers and chronic patients on long-term opioid therapy in Alberta"**

The Signatories,

Reminding all stakeholders that over 800,000 Albertans live with chronic pain;

Noting that thousands of Albertans with chronic pain are currently on long-term opioid therapy;

Affirming that some individuals with chronic pain have improved functioning due to opioids, as noted in the Canadian Opioid Guidelines;

Stressing that no individual on long-term opioid therapy should be abruptly discontinued;

Conscious that some patients on long-term opioid therapy are encountering difficulty in getting their prescriptions renewed;

Acknowledging that there is a cohort of soon retiring physicians with patients on long term opioid therapy who are currently looking for new prescribing physicians;

Appreciating that many physicians are reluctant to take on new patients on long-term opioid therapy;

Reaffirming that the College of Physicians and Surgeons of Alberta has provided clear messaging to its members supporting continuity of care for individuals on long-term opioid therapy;

Recognizing that current opioid prescribing practices can be improved upon to promote patient wellbeing; and

Understanding that a provincial wide approach is the best way to address the scale and scope of this problem.

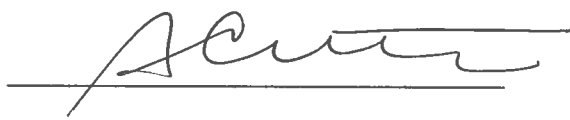
1. Call upon each Primary Care Network (PCN) to support its own chronic pain patients on long-term opioids in finding new prescribing physicians within their PCN medical home, should their current physician prescriber no longer be available to ensure continuity of care.
2. Support designated opioid prescribing services within specialized multidisciplinary chronic pain clinics containing pharmacy, psychology, and addiction services. Multidisciplinary chronic pain clinics have the knowledge and experience required to assist with especially complex presentations through evidence-based pain management.
3. Recognize the unique challenges and, at times, less than optimal outcomes these designated opioid prescribing services will have to contend with.
4. Recommend the creation of a close referral consultation relationship between the PCNs and opioid prescribing services within specialized multidisciplinary pain clinics in order to support PCN management of chronic pain patients in their medical home and assume prescribing only when the needs of the patient exceed the abilities of the PCN. These services should be available by telephone and video conferencing to support patients and PCNs in rural and remote areas.
5. Encourage patients to remain in their PCN medical home as much as possible and move to care at multidisciplinary plain clinics only when required.
6. Support the creation of a provincial alternate relationship plan (ARP) for chronic pain to promote the flexible provision of services within PCNs and multidisciplinary chronic pain clinics.

7. Recommend capacity building within the PCNs to provide evidence-based, biopsychosocial approaches to support patients living with chronic pain throughout the province of Alberta.

Signed on Oct 18, 2019 in Lake Louise at the 13th Annual Conference of the Pain Society of Alberta.



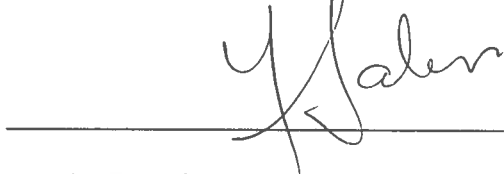
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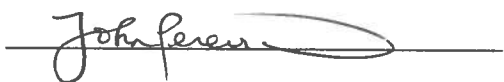
Yasmin Majeed, President, Alberta Medical Association Section of Chronic Pain



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