

Tips for Community Pharmacists

What is the Opioid Tapering Process?



Opioid tapering is the gradual reduction of opioid use. Community pharmacists can support prescribing clinicians who are tapering their patient's opioid dose. Pharmacists can become familiar with the common reasons for starting a taper, the benefits and risks of tapering opioids, and tapering strategies.

Talk through and address the patient's concerns and worries and be ready to answer potential questions. If patients ask you about the process, you can develop rapport and build trust with effective communication and empathy. It's important to validate patients' experiences throughout the opioid tapering process.

You might also practice in a setting that allows you to facilitate the patient's care delivery process through delegated prescriber services outlined in a collaborative practice agreement (CPA). Pharmacists in this role monitor patients often and will communicate with their prescriber as needed for opioid withdrawal management, pain, and any mental health comorbidities. You can find more information on CPAs at the end of this document.

Becoming Familiar with the Tapering Process

Patients may begin an opioid taper for any of the following reasons:

- They request dosage reduction or discontinuation.
- Pain improves, which might indicate the resolution of an underlying cause.
- Opioid therapy has not meaningfully reduced pain or improved function.
- They have been treated with opioids for a long time (e.g., years), and the benefit-risk balance is unclear.
- They have received higher dosages without evidence of benefit from the higher dose.
- The patient is experiencing side effects that affect quality of life or impair function.
- There is evidence of opioid misuse.
- They experience an overdose or other serious event (e.g., an event leading to hospitalization or injury).
- They are taking other medications (e.g., benzodiazepines) or have other medical conditions that increase the risk of adverse outcomes.

Opioid tapering is an individualized process. Some patients may have a goal to reduce their dosage, while others may want to stop opioid use. The reduction rate can differ based on factors like how long the patient has been taking opioids ([Recommendation 5](#)).

It is important to note here that unless there are indications of a life-threatening issue, such as warning signs of impending overdose (e.g., confusion, sedation, or slurred speech), opioid therapy should not be discontinued abruptly, and patients should not have rapidly reduced opioid dosages from higher dosages.

Collaborative Practice Between Pharmacists and Prescribers

Collaborative practice agreements (CPAs) extend the role of pharmacists to provide specific patient care services delegated by a collaborating prescriber under negotiated terms outlined in a formal agreement. These services most often include initiating, modifying, or discontinuing medications. In the context of opioid tapering, some tasks that involve pharmacists include:

- Monitoring a patient's progress,
- Gradually adjusting the rate and duration of the taper,
- Managing patients with opioid withdrawal symptoms.

Patients have expanded access to coordinated, team-based care when CPAs are put in place.

It is essential to be familiar with when and how to use CPAs, as the terms and patient care functions between pharmacists and prescribers may be defined differently in each state.

Want to know more?

Check out the following links for more information on related topics.

- [CDC's Clinical Practice Guideline for Prescribing Opioids for Pain](#)
- [Tapering Mini Module](#)
- [Opioid Prescribing Resources](#)
- [Nonopioid Therapies for Pain Management](#)
- [Continuing Opioid Therapy](#)
- [Opioid Information for Patients](#)