

Optimization of Inpatient Documentation to Improve Bowel Regimen Prescribing Rates and Impact on Opiate Induced Constipation

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Introduction

Opioid analgesics are commonly used in the inpatient setting to alleviate moderate-to severe-pain. These medications inhibit gastric emptying and slow peristalsis in the gastrointestinal tract which can contribute to constipation. Opioid-induced constipation accounts for between 40-80% of patients and may present immediately or develop gradually after usage. Due to this adverse effect, it has been suggested that a bowel regimen should be prescribed when initiating an opiate medication.

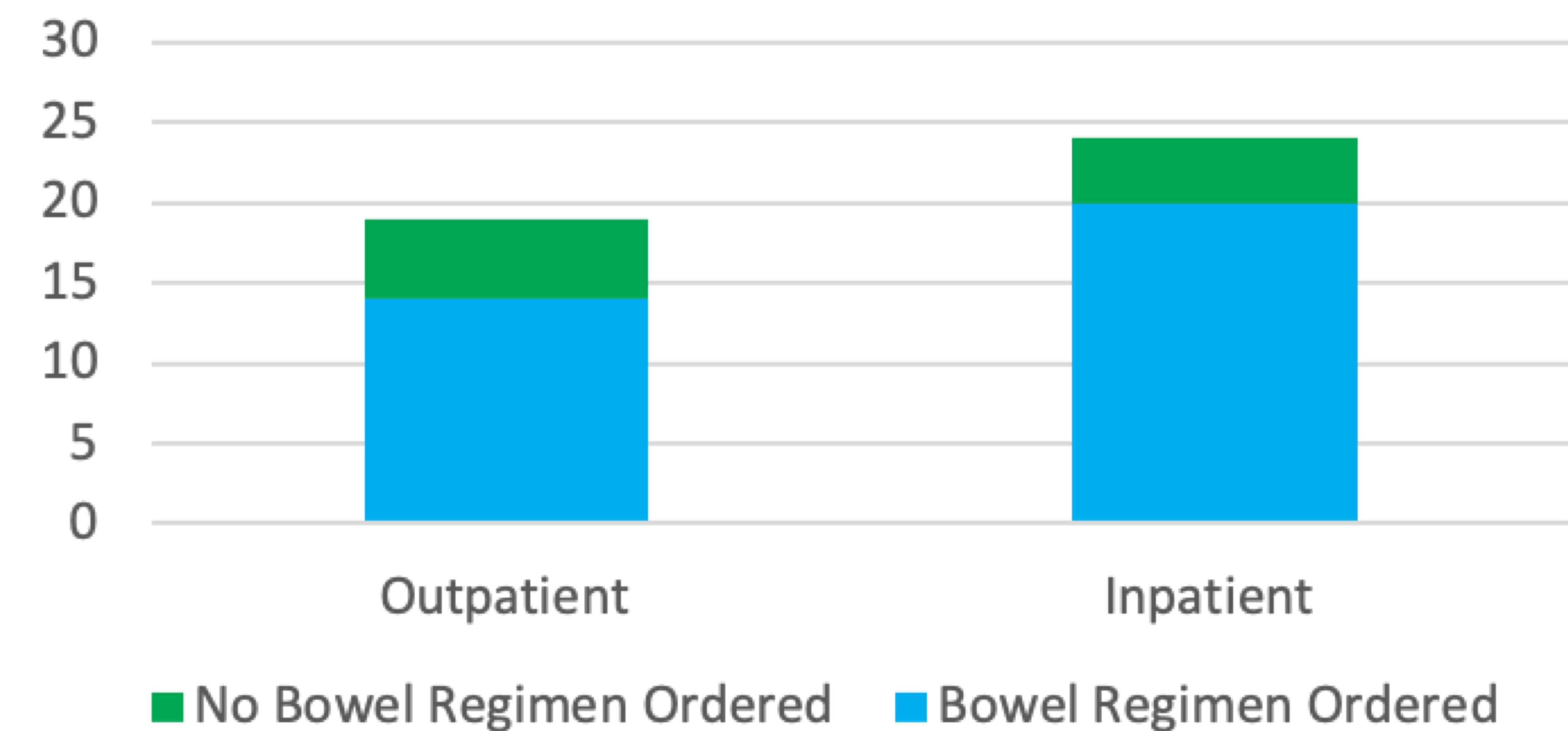
Methods

- Prospective Study
- Tertiary Care Center in Pittsburgh, PA
- Implemented checklist in the inpatient History and Physical Template
- Collected Data from admissions to residency teaching teams during a 5-week period from February to March 2021

Results

- Total of 90 admissions
- 19 patients had opiate medications prescribed prior to admission
 - 14 were prescribed a bowel regimen as an outpatient
- 24 opiates prescribed during their admission to the hospital
 - 20 were prescribed a bowel regimen
 - 1 patient developed ileus despite being prescribed bowel regimen

Bowel Regimen Usage with Opiates



Discussion

- Continuous assessment of bowel function
- Incorporation into clinical notes for prompt management
- Remind providers of need to prescribe bowel regimens to decrease secondary constipation
- Improve patient experiences and prevent discomfort

References

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2. Crockett SD, Greer KB, Heidelbaugh JJ, et al. American Gastroenterological Association Institute Guideline on the Medical Management of Opioid-Induced Constipation. *Gastroenterology*. 2019;156(1):218-226. doi:10.1053/j.gastro.2018.07.016