

Substance Abuse: The Pharmacy Educator's Role in Prevention and Recovery

Curricular Guidelines for Pharmacy: Substance Abuse and Addictive Disease

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BACKGROUND OF THE CURRICULUM DEVELOPMENT PROJECT

In 1988, the AACP Special Interest Group (SIG) on Pharmacy Student and Faculty Impairment (renamed Substance Abuse Education and Assistance) undertook the development of curricular guidelines for colleges/schools of pharmacy to facilitate the growth of educational opportunities for student pharmacists. These Curricular Guidelines for Pharmacy Education: Substance Abuse and Addictive Disease were published in 1991 (AJPE. 55:311-16. Winter 1991.)

One of the charges of the Special Committee on Substance Abuse and Pharmacy Education was to review and revise the 1991 curricular guidelines. Overall, the didactic and experiential components in the suggested curriculum should prepare the student pharmacist to competently problem-solve issues concerning alcohol and other drug abuse and addictive diseases affecting patients, families, colleagues, themselves, and society.

The guidelines provide ten educational goals, while describing four major content areas including: psychosocial aspects of alcohol and other drug use; pharmacology and toxicology of abused substances; identification, intervention, and treatment of people with addictive diseases; and legal/ethical issues. The required curriculum suggested by these guidelines addresses the

¹ These guidelines were revised by the AACP Special Committee on Substance Abuse and Pharmacy Education. Members drafting the revised guidelines were Edward M. DeSimone (Creighton University), Julie C. Kissack (Harding University), David M. Scott (North Dakota State University), and Brandon J. Patterson (University of Iowa). Other Committee members were Paul W. Jungnickel, Chair (Auburn University), Lisa A. Lawson (University of the Sciences in Philadelphia), Matthew M. Murawski (Purdue University), Raylene M. Rospond (Drake University), and Jennifer Athay (AACP).

² Addiction and Related Disorders is the terminology that has been proposed for use in the Diagnostic and Statistical Manual of Mental Disorders, proposed 5th edition., American Psychiatric Association, Washington DC (scheduled for release May 2013) (commonly, “DSM-V”).

anticipated and unanticipated effects of both nonprescription and legally prescribed drugs, alcohol, and other substances of abuse. Identifying characteristics of addiction and related disorders and patterns of abuse and dependence, are also included to allow pharmacists to assist in early identification and assistance where appropriate. Issues concerning addicted pharmacists, student pharmacists, and other health care practitioners are discussed. Methods of prevention, intervention, referral, withdrawal, treatment, and recovery support are also presented.

Ideally, all of the proposed curricular content should be incorporated into the educational experiences of all student pharmacists. Components of the suggested curriculum should be integrated throughout existing coursework, but beginning as early as possible after students enter pharmacy studies. Thus the coursework should span didactic classes and experiential work, both Introductory Pharmacy Practice Experiences and Advanced Pharmacy Practice Experiences. As each pharmacy curriculum is unique, information provided in classes such as anatomy, physiology, biochemistry, pharmacology, and toxicology will dictate positioning of some of the suggested didactic material and experiential components.

Students should also be provided with elective opportunities for those wishing to obtain additional specialized knowledge and skills concerning addiction and related disorders. These include elective didactic coursework concerning addiction, wellness, and prevention, as well as elective Advanced Pharmacy Practice Experiences (APPE) utilizing community addictive disease resources such as information services, treatment providers (e.g., methadone clinics, and addiction treatment centers), drug courts, and community prevention programs.

CURRICULUM GUIDELINES

Educational goals. Upon graduation from the college/school of pharmacy, students should be able to:

1. Describe the extent and patterns of addiction related to alcohol and other drug (AOD) abuse in society and in the health professions, especially pharmacy.
2. Explain how addiction and related disorders impact the professional role(s) of a pharmacist.
3. Describe risk factors, abuse potential, and abuse patterns for psychoactive drugs (prescribed, nonprescription, and illegal drugs) and the laws which regulate their use.
4. Describe the major pharmacological and toxicological properties of alcohol and commonly abused drugs and related substances.
5. Describe addiction as a disease, its etiology, and its effects on families and society, as well as other psychosocial issues that may affect prognosis and therapeutic response.
6. Recognize impairment, describe intervention actions, and identify assistance resources for individuals affected by addiction and related disorders.
7. Utilize resources within the profession to obtain assistance for addicted colleagues and student pharmacists.
8. Describe the major modalities of addiction treatment and discuss and utilize methods of providing support for the ongoing recovery of addicted individuals, family members, and other persons involved.
9. Counsel individuals who are recovering from addictive diseases concerning appropriate use of herbal/supplement, nonprescription and prescription drugs.
10. Advocate for pharmacist involvement in community substance abuse addiction education and prevention.

Suggested guidelines by area. The guidelines that follow suggest the ideal positioning of certain material, the nature of required and elective experiences, and other recommendations for implementation within the curriculum. Specific objectives for each identified area are included in Appendix A. Many relevant texts are available in bookstores as well as community and university libraries. Numerous on-line and other resources are also available.

Teaching approaches could include lecture format, reading assignments, or group discussions. Potential elective experiences could include visits to substance abuse resource centers, treatment agencies, and self-help groups (especially those based on the 12 steps of Alcoholics Anonymous). Term papers, recorded movie media (e.g., DVDs, Web site resources, brief video-clips) and printed materials from information services may also be utilized as part of elective experiences.

Attendance at The University of Utah School on Alcoholism and Other Drug Dependencies is strongly encouraged for both students and faculty. Colleges/schools should grant elective credit for attendance at the Utah school.

Psychosocial Aspects of Alcohol and Other Drug Use

It is recommended that material on psychosocial aspects of use be initiated within the first 3 semesters of the pharmacy curriculum within required courses. Lecturers should preferably have social-behavioral science backgrounds or related work experience. Elective courses designed to prepare student pharmacists to provide community drug abuse education could also be placed early in the curriculum. Course topics could include a basic introduction to alcohol and other drug abuse patterns, the impact of addiction on public health, basic treatment methods, assistance resources, and how to provide community education programs at an appropriate level and answer questions (e.g., why drugs are used and consequences of use, definition of abuse vs. addiction, avoidance as the most effective prevention method, coping with peer pressure and advertising, and getting help in the community). Kindergarten through 12th (K-12) grade curriculum guides concerning substance abuse prevention are often available from schools, as well as governmental (i.e., NIDA.gov), or community organizations dedicated to drug abuse education. It is desirable to have the student pharmacists participate in the presentation of a program suitable for community drug education, with supervision by an

individual experienced in such education. If it is not feasible to present this to the target audience, an audience of other students in the class or college could be asked to assume the attitude of the target population. Students should be encouraged to attend community drug presentations, open 12-step meetings (such as Alcoholics Anonymous, Narcotics Anonymous, Al-Anon, and Nar-Anon), or substance abuse education seminars as a component of the course. Participation in healthy lifestyle and stress management elective courses and/or clinical rotation experiences is encouraged. Special activities such as having students “give up something of importance to them” such as fast food, candy, ice cream, alcohol, or social networking sites for a set period of time while journaling and reflecting on their experiences is also encouraged.

Pharmacology/Toxicology and Therapeutic Aspects of Alcohol and Other Psychoactive Drugs

It is recommended that this material be covered primarily within the pharmacology and toxicology course sequence(s). Information regarding drug testing, recognition of addiction, treating withdrawal, and recovery maintenance therapy may be included in other coursework such as applied pharmacotherapeutics.

Lectures should normally be given by pharmacology or clinical practice faculty as appropriate. Lectures by local experts from poison control centers, toxicology/forensic laboratories, other campus health professions disciplines, campus, community, or governmental drug abuse resources or treatment facilities, may be included, if these individuals are willing to present within content needs. Additional teaching aids such as videos, term papers, computer-assisted learning modules, and focused discussion groups may be utilized to augment lecture material.

Addictive Disease: Identification, Intervention, and Treatment

It is suggested that at least four hours be devoted to the identification, intervention, and treatment of addiction and related disorders, possibly during a pharmacotherapeutics course sequence. Basics of student or professional peer assistance programs should be introduced during or within a month after new student orientation. Instructors for this content should have a working knowledge of addictive disease assessment, treatment, and recovery, as well as student and professional assistance resources. Involvement of treatment center or employee assistance program professionals may be valuable, but student- and pharmacist-specific professional issues must be addressed. Professionals, who are recovering from addiction, returning to "tell their stories" are very effective and can have a strong impact on student perception of addiction and the problems it brings to everyone involved. Student attendance at an "open" 12-step meeting helps to break through the social "stigma" associated with these diseases. Faculty who have utilized 12-step meeting attendance as part of the learning process have found this to be a valuable and highly educational experience. Student reflection papers written about the 12-step experience help students to evaluate their feelings or biases about individuals who suffer from addictive disease.

Local 12-step programs, alcohol and drug information services, community education programs, and state and federal resources can provide highly educational information. A directory of area treatment programs and state impaired pharmacist programs is suggested handout material. The www.usaprn.org Web site lists pharmacist recovery assistance programs by state.

Potential elective experiences could include: 1) didactic coursework available through local colleges, especially those providing addiction education (it is recommended that the college/school accept these as pharmacy curricular electives), and 2) advanced pharmacy practice experiences (APPE) in detoxification units or addictive disease treatment centers, drug courts, or even addiction research centers such as the National

Institute on Drug Abuse (NIDA) and National Institute on Alcohol Abuse and Alcoholism (NIAAA). Other recommended non-didactic activities include:

1. Within the first month of school, an orientation to college/school policies on student addiction and related disorders, impairment, treatment, and recovery.
2. A similar orientation for faculty members concerning both student and faculty issues (when major new programs are implemented and during new faculty orientation).
3. The development and promotion of a student addictive disease prevention, assistance, and support committee whose primary activities would include primary prevention efforts within the school/college, identification of students with addiction or related disorders, encouraging students with these problems to obtain assistance, referral to assistance resources, and recovery support following treatment. Where feasible, assistance programs should coordinate their activities with the state's pharmacist recovery program.
4. Additional advanced training in addiction and related disorders, if available.
5. Inclusion of addiction and related disorders topics in student organization programming and in college/school seminar programs.

Legal and Ethical Issues

Core legal content should normally be contained within a pharmacy law course. Campus substance abuse and student assistance policies and procedures, and established rules concerning alcohol use, control, and promotion on campus or at any activity sponsored by a campus or college/school representative or organization should be presented to the students within student orientation or during the first month after matriculation. Legal issues related to identification, intervention, referral, treatment, and recovery of addicted students and pharmacists, and issues relating to confidentiality and

liability, can be placed at any point in the curriculum—as long as they are prior to practice experiences. This would include both IPPE and APPE opportunities.

Instructors should have a contemporary knowledge of professional, law enforcement, and regulatory aspects of addiction and a proven ability to convey such information. In some cases, campus, community, or governmental resources such as substance abuse counselors or educators; members of the Board of Pharmacy; representatives of enforcement agencies, and community prevention and treatment organizations; and individuals representing professional addictive disease assistance programs may be utilized. Resources for content may include existing federal, state and local laws.

Substance abuse, sociology, or law enforcement courses offered within the college/school, elsewhere on campus, or at other local institutions, are potential elective opportunities for students to expand their understanding of impairment and the judicial process.

Students should be exposed to the ethical and moral issues involved in the area of addiction and related disorders. They should be given the opportunity to reflect on their perceptions of the addict, and the addict's impact on society as a whole, and on other individuals specifically. Other areas for ethical reflection should include the issue of pharmacies selling alcohol and tobacco products.

APPENDIX A. OBJECTIVES FOR STUDENT PHARMACIST SUBSTANCE ABUSE EDUCATION

The following are suggested objectives for the education of student pharmacists concerning addiction and related disorders, including alcohol and other drugs. The reader is referred to the text for information concerning suggested positioning of this instructional content within the curriculum.

A. Psychosocial Aspects of Alcohol and Other Drug Use

Students should be able to:

1. Define the following terms as they relate to non-therapeutic psychoactive drug use: abstinence, alcohol abuse, alcoholism, blackout, chemical (or drug) dependency, drug abuse, binge drinker, heavy drinker, physical dependence, psychological dependence, addiction, intervention, detoxification, recovery, relapse, sobriety, substance abuse, tolerance, and withdrawal.
2. Relate a historical perspective of non-therapeutic psychoactive drug use in society and how this history provides a perspective for our current drug-related experiences, and describe cultural changes that have occurred in American society over the last 100 years and how these changes relate to alcohol and psychoactive drug use, abuse, and addiction.
3. Describe and give examples of how appropriate use of psychoactive drugs helps to shape and meet the needs of society.
4. Summarize current information on the epidemiology of alcohol and other drug abuse, including ethnic and other influential factors.
5. Identify predisposing factors to the development of alcoholism and other addictive diseases, as well as relapse to alcohol or other drug use.
6. Discuss the disease of addiction, including research findings, supporting and utilizing the following disease characteristics: denial, primary, progressive, chronic, relapsing,

treatable (recovery), and family-centered.

7. Define and describe what is meant by adult children, dysfunctional family roles, and codependence.
8. Describe the impact of dysfunctional families on the development of adult children, dysfunctional family roles, and codependence
9. Discuss the relationship between alcohol and other drug use with behavioral problems, crime, violence, school/work issues, and chronic medical and mental illnesses.
10. Discuss student and pharmacist involvement in community drug abuse education and prevention, and identify potential educational needs, approaches, and resources appropriate to each target population (elementary, middle school, and high school; adult; and geriatric populations).

B. Pharmacology/Toxicology and Therapeutic Aspects of Alcohol and Other Psychoactive Drugs

Students should be able to:

1. Describe and explain the major pharmacological effects, therapeutic uses, adverse effects, overdose effects, addiction potential, and withdrawal syndromes associated with psychoactive substances (to include, alcohol, nicotine, caffeine, cocaine, amphetamine and other stimulants, opiates and opioids, cannabis, inhalants, entactogens, anabolic steroids and other performance enhancing drugs, designer drugs, and street drugs) on persons of all ages as well as during pregnancy and breastfeeding.
2. Describe the various methods of prevention and treatment of overdose and withdrawal syndromes associated with agents listed in #1 above.
3. Describe the contribution of addictive and related disorders to the risk of pregnancy, and exposure to and infection with HIV, hepatitis, and other communicable diseases.
4. Describe the pharmacologic agents utilized in the maintenance of recovery for addicted individuals, how they are used, and the limitations of these agents.

5. Describe how to obtain help for an individual who has overdosed.

C. Addictive Disease: Identification, Intervention, and Treatment

Students should be able to:

1. Identify and apply the major diagnostic indicators for addictive diseases.
2. Describe the characteristics of addiction to alcohol and other drugs as well as the general course and progressive nature of this disease.
3. Describe the process involved in a formal intervention (including the role of family members, friends, employers, and other significant persons) for addictive diseases and the role of this process in getting addicts into treatment and offering them hope for recovery.
4. Describe the level and cost of treatment services that are covered by student and employee health insurance, and other health insurance plans.
5. Identify addiction and related disorders assistance resources available for all individuals, including students at their colleges/schools and how to access pharmacist assistance programs throughout the United States.
6. Discuss the role of employee assistance programs in the workplace.
7. Describe the value and limitations of contracting for evaluation, treatment, and recovery in student and pharmacist assistance programs.
8. Explain the modalities of treatment for addiction and related disorders as well as personality and other characteristics that are predictors of treatment outcome.
9. Explain the basic principles of 12-step programs [to include Alcoholics Anonymous, Al-Anon, Alateen, Narcotics Anonymous, Nar-Anon, Nicotine Anonymous, Adult Children of Alcoholics (ACoA), and Codependents Anonymous (CoDA)]; their methods of operation; their relationship to treatment and recovery; their target populations; and how to refer patients to these programs. (It is recommended that students also receive information about other addictive behaviors and treatment options for eating disorders, gambling, and sex addictions, as well as support groups such as Overeaters Anonymous

or Gamblers Anonymous.)

10. Describe the role and impact of adjunctive measures in treatment and recovery such as: stress management, assertiveness, self-talk concepts, job training, wellness, and nutrition.
11. Describe aftercare approaches in the continuum of treatment/recovery.
12. Identify indicators of potential relapse and proven prevention strategies, and describe contingency plans that may be utilized by recovery assistance programs in the event of a relapse.
13. Discuss the role of urine, hair, saliva, and other types of drug and alcohol testing in recovery as well as procedures to reduce the likelihood of false positives, false negatives, and sample tampering.
14. Discuss the goals of treatment and expected outcomes based upon population served (such as court-referred, job jeopardy, or organized professional assistance programs).
15. Identify common issues faced by health care professionals, including pharmacists and student pharmacists, re-entering college/school or jobs following addiction and related disorders treatment, including such things as narcotic access, participation in social activities, and personnel who should and who do have access to confidential information.
16. Provide counseling for the individual in recovery from addictive and related disorders concerning the impact that other health problems or medication use (psychoactive or not) have on recovery, and provide information on alternatives to support recovery and minimize the risk of relapse.
17. Explain the role of co-morbid psychiatric disorders as a complicating factor in addiction and related disorders' diagnosis, treatment, and recovery.

D. Legal Issues

Students should be able to:

1. Discuss existing laws and penalties as they pertain to the abuse of alcohol and the control, distribution, and abuse of drugs and other substances.

2. Relate how campus and college/school policies concerning the abuse of alcohol and other drugs reflect current legal constraints, and identify how these policies may be reflected as societal trends or norms.
3. Discuss appropriate pharmacy security considerations to deter and to deal with theft of controlled substances.
4. Discuss the legal implications of forged or altered prescriptions and of dispensing prescriptions when there is clear evidence that the patient is obtaining the prescription in excess or in the absence of a legitimate medical need.
5. Describe appropriate action to take when a pharmacist is presented with a forged, altered, or obviously non-therapeutic prescription for a controlled substance.
6. Discuss how impairment, treatment, and recovery might affect a person's ability to obtain or retain a license to practice as an intern or pharmacist.
7. Describe the role of state pharmacist assistance networks (PRNs) and legal procedures including contracts in the recovery process for student pharmacists and pharmacists.
8. Discuss college/school policies concerning impairment and the availability of assistance resources.
9. Discuss the legal requirements for reporting impaired practitioners, especially those who refuse to obtain assistance.
10. Discuss liability issues concerning the employment of impaired pharmacists/student pharmacists, reporting vs. failure to report impairment, and employment of pharmacists/student pharmacists in recovery.
11. Explain the nature and intent of federal laws governing confidentiality, especially regarding treatment records, and observe these regulations in dealing with patient care and professional assistance issues.

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