

Opioid Management Therapies in the misuse of narcotics in pregnant women.

Baileigh Swearington

East Tennessee State University

Introduction

Opioid misuse has become increasingly significant in expecting mothers over the years. Doctors and researchers have created data charts to further investigate the use of opioid management therapies such as Methadone and Buprenorphine to combat Neonatal Abstinence Syndrome and determine the long-term effects it would have on a developing child (Kaltenbach et al., 2018).

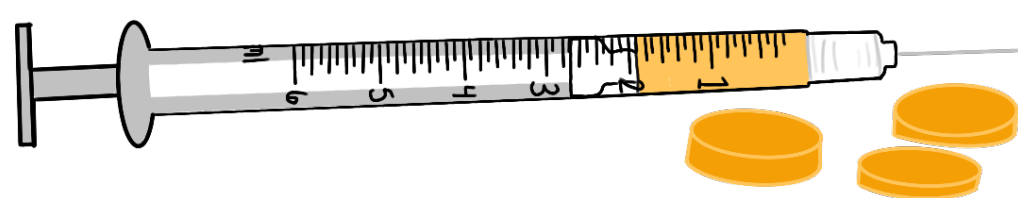
- The purpose of these studies were to determine how the management therapies would affect infant development (Handal et al., 2019.)

Purpose

Expecting mothers who misused opioids during pregnancy underwent opioid management therapies to determine long-term effects on the development of the infant in comparison to expecting mothers misusing opioids and not undergoing treatment (Sebastini et al., 2018). Researchers expected the outcome to greatly influence no harmful defects on the infants who experienced management treatment in utero for the duration of the pregnancy until three years of age (Handal et al., 2019).

Background

- The studies focused on determining the development of the infant and the effects it would have on cognition, sensory perception, and the duration of the hospital stay in correlation to the opioid management therapy underwent in utero (Kaltenbach et al., 2019)
- Infant development would be measured on the Neonatal Abstinence Syndrome Scale (Wachman et al., 2018) as well as using the Mother scale (Kaltenbach et al., 2019)
- Opioid Management Therapies were used to conclude the differences in infants undergoing treatment to those who did not in utero (Sebastini et al., 2018).



Literature Review Methods

East Tennessee State University Sherrod Library was used to search in databases such as PubMed and CINAHL for 5 articles pertaining to Opioid Management Therapy. The CDC was further used to determine a more in-depth need for management therapy.

- Key words: "Opioid Management", "fetal development", "Neonatal Abstinence Syndrome therapy", "Methadone therapy in utero"

Significant Findings

- A study of 175 women was conducted to provide substantial evidence that the use of Buprenorphine and Methadone had no harmful lasting effects on infants up to age three when used as an opioid treatment therapy (Kaltenbach et al., 2018).
- Nursing Interventions were put into the research to determine if both pharmacologic treatment such as Methadone and non-pharmacologic treatment such as staying in the room with the mother after delivery would conclude a positive fetal development (Wachman et al., 2018). This study concluded that there was a 20-60% decrease in hospital stay for the infant (Wachman et al., 2018).
- In the study from Handal et al, 2019 it was found to have similar results from women who underwent the maintenance therapy and those who did not, both groups that were researched had infants with similar development.
- Similarly in another study while there was no substantial difference in treatment or no treatment, researchers found that infants who did not receive treatment were born with greater risk for withdraw toxicity (Sebastini et al., 2018).



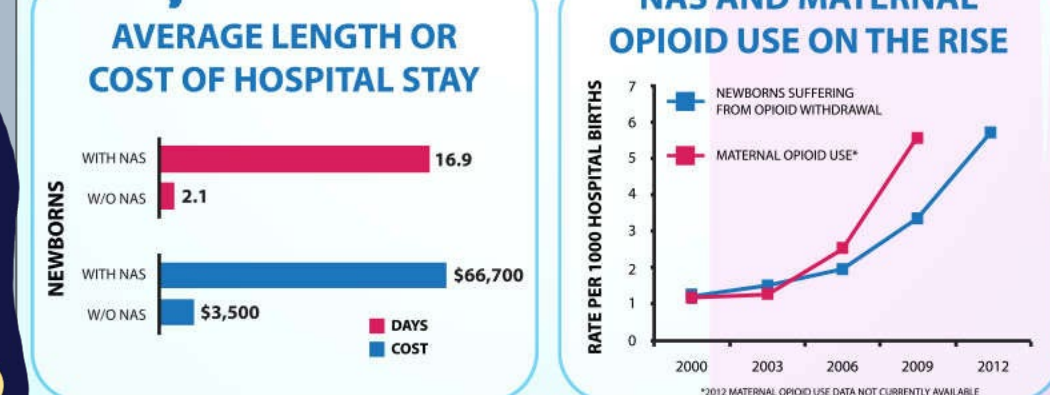
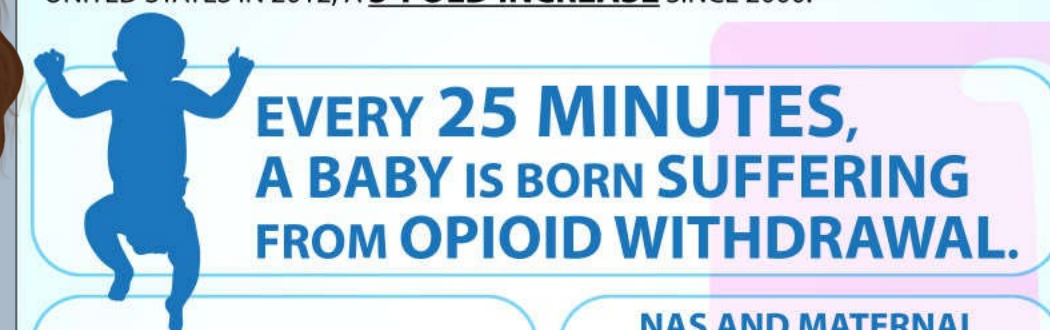
Conclusion

The need for more education for women undergoing opioid management therapy is evident within the research provided (Sebastini et al., 2018). The use of Methadone and Buprenorphine have been concluded useful in the treatment of women misusing opioids during pregnancy and have a positive affect on infant development through 36 months of age (Kaltenbach et al., 2018).

- Furthermore, to conclude the research, the CDC recommends the use of both Methadone and Buprenorphine as an adequate first-line of defense treatment in the fetal development in utero and during the first few years of growth (CDC, 2021).

DRAMATIC INCREASES IN MATERNAL OPIOID USE AND NEONATAL ABSTINENCE SYNDROME

THE USE OF OPIOIDS DURING PREGNANCY CAN RESULT IN A DRUG WITHDRAWAL SYNDROME IN NEWBORNS CALLED **NEONATAL ABSTINENCE SYNDROME (NAS)**, WHICH CAUSES **LENGTHY AND COSTLY HOSPITAL STAYS**. ACCORDING TO A NEW STUDY, AN ESTIMATED **21,732 BABIES** WERE BORN WITH THIS SYNDROME IN THE UNITED STATES IN 2012, A **5-FOLD INCREASE** SINCE 2000.



National Institute on Drug Abuse. Patrick et al., JAMA 2012.
Journal of Perinatology 2015. <https://www.nichq.org/insight/new-framework-curb-births-babies-born-dependent-drugs>

References

