NEGOTIATING UNCERTAINTY IN HOSPITAL GUIDELINES FOR MANAGEMENT OF OPIOID WITHDRAWAL

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Background
In many hospitals withdrawal management for people who use opioids is inconsistent or inadequate, increasing risk of discharge against medical advice and associated harms. Guidelines intervene in this uncertain care landscape by ordering clinical action, aiming to ensure the visibility, intelligibility and comparability of practices. Using insights from the Improving Hospital Opioid Substitution Therapy (iHOST) study, we explore how uncertainty surrounding opioid withdrawal is conceptualised, contained and embraced by guideline designers, and the impact on clinical guidelines and practices.

Methods
The iHOST study included the development of guidelines for the clinical management of opioid withdrawal at three large teaching hospitals in England. iHOST guidelines were subsequently requested to inform guideline development at several NHS Trusts not included in the study. This analysis draws on interviews with guideline designers and clinicians at study and non-study sites, a document analysis of iHOST-informed guidelines for opioid withdrawal management, and a survey of clinicians with expertise in substance use that informed guideline development.

Results
Three domains of uncertainty in opioid withdrawal management are explored. 'Uncertain expertise' describes how designers evaluate 'best practice' in the absence of an expansive evidence base, few specialist clinicians in the hospital, and a clinical workforce lacking confidence in prescribing Opioid Substitution Therapies. 'Uncertain function' describes how guidelines hold multiple, often contradicting, ambitions for designers that create tensions and ambiguities in the development process. 'Uncertain implementation' describes how the introduction of guidelines raises new questions of adherence and effectiveness, and in their remaking of practices creates possibilities for broader transformations of care for people who use opioids.

Conclusion
Hospital care for people who use opioids is characterised by uncertainty for clinicians and patients. With claims to objectivity guidelines are posited as a means of resolving uncertainty, but their development and impacts are shaped by strategies for managing the unknown.

Disclosure of Interest Statement
None.