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What is the best approach in oncologic patients with opioid addiction?

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Drug abuse and especially opioid abuse, represents a whole of physical and psychosocial issues. But, when it is complicated with cancer diseases, it becomes a challenge for the addiction team and the oncologist. One of the main treatments for cancer pain is opioid therapy. These substances can be prone of abuse and can develop tolerance or physical dependence. But while treating cancer pain in a chronic heroin abuser by methadone maintenance treatment (MMT), the challenge is much more difficult. Hence, through this work we want to share our experience in the treatment of a patient diagnosed with pancreatic cancer with obstructive infiltration of colon, hospitalized at the American Hospital, Tirana, Albania in 2015, for palliative surgery. The patient considered for the study was 35 years old, had a history of heroin abuse via inhalatory route. Age at first abuse was 21 years old, and from that age till present, the patient had several episodes of opioid abstinence and relapses. About 14 months prior to admission in our hospital, he started opioid-substitution treatment with methadone 40 mg/day. The challenge of the treatment team was in finding the best pain treatment, the appropriate dosage for pain relieving, but with lower side effects. In front of such complicated patient, the best treatment is a multidisciplinary approach, a careful follow up, and high comprehension

Biography

Sonila Bitri Tivari has completed her studies from the University of Medicine, Albania 2004 and Specialization in Clinical Toxicology and Addiction in 2010. Currently, she works as a Clinical Toxicologist at the American Hospital, Tirana, Albania. Her field of interest is Drug Addiction (opioid, alcohol, etc.) and has given several trainings in this field. She has taken part in several international conferences in this field like: Global Addiction Congress, UNDP

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