

Stigmatizing Language in the Medical Record After Addiction Consult Service Implementation

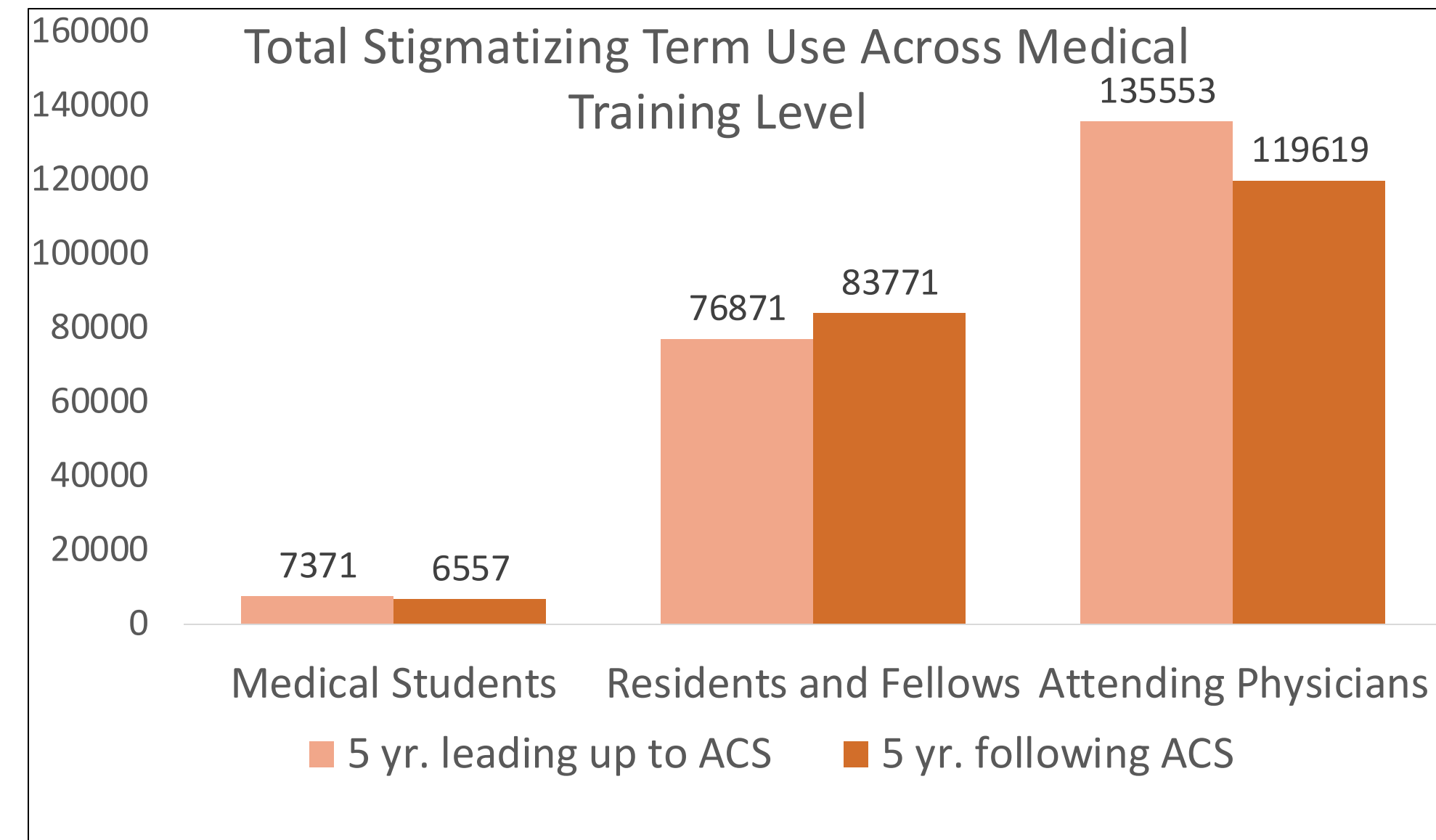
Introduction

- Stigmatizing language (SL) by healthcare providers, and the associated negative patient outcomes related to these terms, persist throughout the Electronic Medical Record (EMR)¹
- Healthcare professionals generally hold negative attitudes toward patients with addictive disorders and find caring for admitted patients with SUDs less satisfying.²
- Incorporation of an Addiction Consult Service (ACS) into a general medical setting has been associated with improved attitudes of healthcare providers toward patients with SUDs³, including health professional trainees⁴.
- We sought to investigate whether the implementation of an ACS would impact the incidence of stigmatizing language in the EMR and how this incidence changes across medical training levels.
- To our knowledge, there are no published studies that investigate the use of stigmatizing terms related to substance use disorder (SUD) in patients admitted to a general medical hospital.

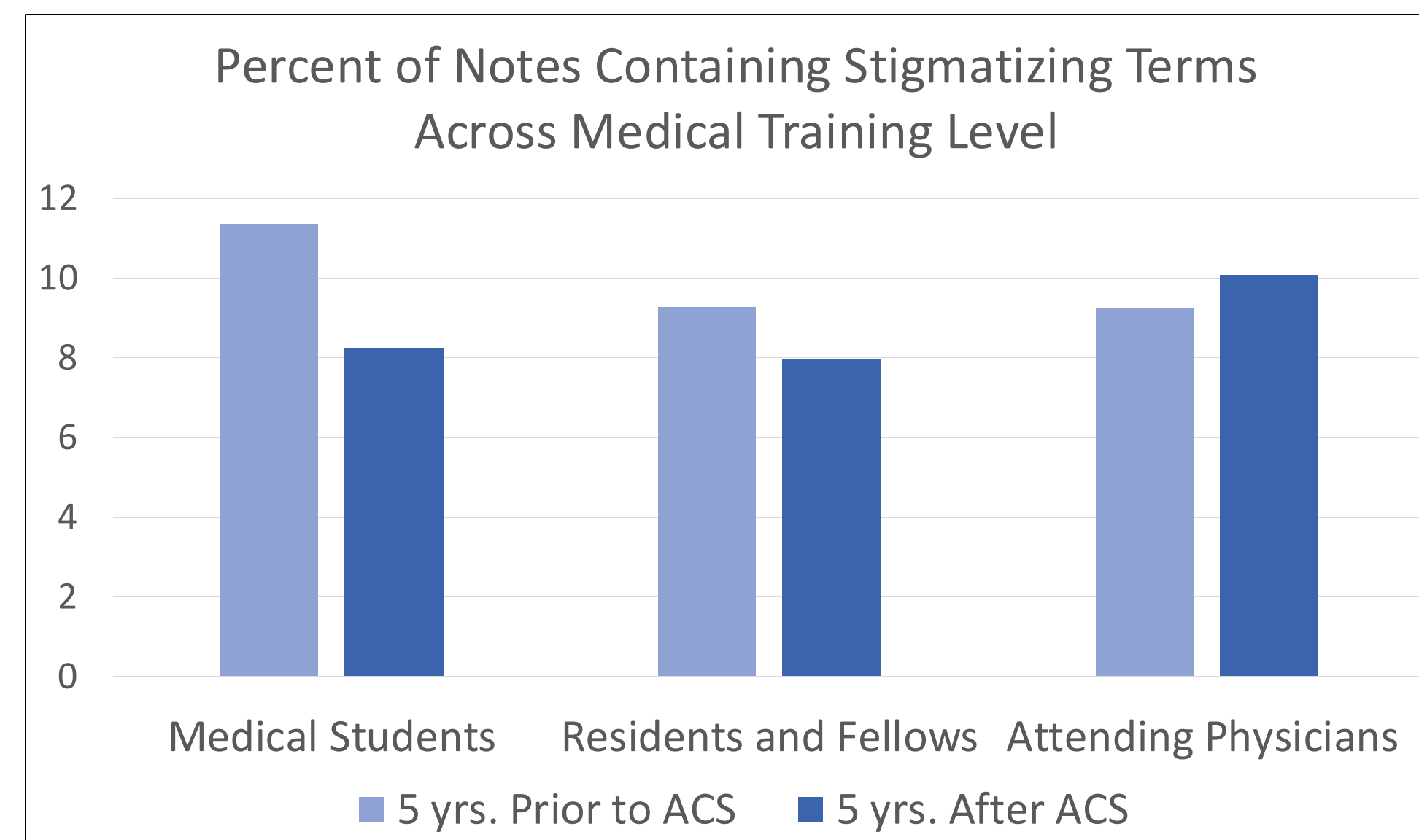
Methods

- Retrospective analysis of electronic medical records of admitted inpatient patients 5 years before and 5 years after ACS implementation
- Analyzed for inclusion of stigmatizing language related to substance use using predetermined string terms: “substance abuse”, “alcohol abuse”, “tobacco abuse” and “other drug abuse”
- Further aggregated into total number of stigmatizing terms.
- Compared across attending physicians, residents and fellows, and medical students.
- Initial analysis using descriptive statistics to analyze total number of notes with stigmatizing terms, and percent of notes containing stigmatizing language

Results



Decreases in total use of stigmatizing terms was seen in Medical Students (7,371 to 6,557) and Attending Physicians (135,553 to 119,619). While the use of stigmatizing terms in residents’ and fellows’ notes was increased (from 76,871 to 83,771).



Residents/Fellows had a 14.6% decrease in use of SL per note, while medical students had a 27.4% decrease in use of SL. Attending physicians

Conclusion

- The absolute use of SL in individual notes increased from 272,102 to 297,667 across all providers combined after our ACS was created.
- We suspect this is due to increased awareness of interventions and thus increased documentation.
- Decreases in percent of resident/fellow and medical student notes containing SL encourages their continued involvement on ACS teams, as well as continued use of SUD related curriculum.
- Future directions for our study include analyzing the breakdown of stigmatizing language use across all provider types, as well as analyzing the differences between specific term use.
- Limitations of our study include the use of a single hospital, and thus a possible lack of diversity in our sample.
- Our study has already impacted future practice, as our EMR is starting to incorporate the use of suggested, non-stigmatizing terms when it detects the use of certain defined stigmatizing language.

References

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Authors and Disclosures

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A. Nothing to disclose