

Opioid Prescribing Trends

Since the Prescription Monitoring Act was passed in 2018 the number of patients receiving non-opioid dependence treatment opioids has been gradually declining year after year. In 2019 an average of 15,788 patients/month received non-ODT opioids and in 2022 an average of 14,178 patients/month received non-ODT opioids. This represents a 10% decrease over that period.

Tips when prescribing opioids for acute pain

It is known that opiates used for acute pain are a risk factor for chronic opioid use. Individual patient characteristics contribute to the progression from acute opioid use to chronic, but most of these are not clinically modifiable. Features of the initial opioid prescription are strong predictors of progression to chronic opioid use, including number of tablets, prescription length, and prescription of oxycodone¹. This is where prescribers can make a difference when choosing to prescribe opioids for acute pain.

Please remember when prescribing opioids for acute pain:

- Prescribe the lowest effective dose of immediate-release opioids for a quantity needed to cover the duration of severe pain, then re-evaluate².
 - 3 days or less typically is sufficient and more than 7 days is rarely needed.
- Counsel your patient that short-term opioid use can lead to unnecessary long-term use, therefore the opioid will be discontinued as soon as appropriate².
- Be wary of prescribing opioids to patients who ask for specific drugs by name, ask for brand name only or specific generic brands, or claim multiple allergies to alternative drugs; this can be a red flag for misuse or diversion³.

References

1. Johnson, D., Ho, V., Hah, J., Humphreys, K., Carroll, I., Curtin, C., & et al. (2022). Prescription quantity and duration predict progression from acute to chronic opioid use in opioid-naive Medicaid patients. *PLOS Digital Health*, 1(8):e0000075. <https://doi.org/10.1371/journal.pdig.0000075>
2. Dowell, D., Ragan, K., Jones, C., Baldwin, G., & Chou, R. (n.d.). *CDC Clinical Practice Guideline for Prescribing Opioids for Pain — United States 2022*. MMWR Recomm Rep 2022. <http://dx.doi.org/10.15585/mmwr.rr7103a1>
3. James, J. (2016). Dealing with drug-seeking behaviour. *Australian prescriber*, 39 (3), 96-100. <https://doi.org/10.18773/austprescr.2016.022>