

Postoperative Opioid Prescribing Patterns –Status Update

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Knowledge changing life



Postoperative Opioid Prescribing: Finding the Balance

Mclsaac, Daniel I., and Karim S. Ladha

- “Shrinking the size of this opioid pool may represent a key opportunity to [improve opioid-related public health.](#)”
- “We need future research to move beyond the limitations inherent in studies that use big data.”

August 2022

Introduction of an Analgesia Prescription Guideline Can Reduce Unused Opioids After Cardiac Surgery: A Before and After Cohort Study ³

Pena, Joseph et al.

- In one recent national survey, approximately 20% of respondents reported sharing prescribed opioid medication with another person.
- Among participants who received an opioid prescription (N = 102), 90% reported storing the opioid medication in an unlocked or unsecure location. Among all participants with leftover opioid tablets (N = 87), 93% had not disposed of the excess medication.
- Notably, of the 15 patients in the after cohort who received prescriptions for more than 20 tablets, a median 16 tablets per participant were left over, suggesting that the authors' recommendation could be restricted further without adverse consequences.

June 2021

Surgeon Variation in Perioperative Opioid Prescribing and Medium- or Long-Term Opioid Utilization after Total Knee Arthroplasty: A Cross-Sectional Analysis ²

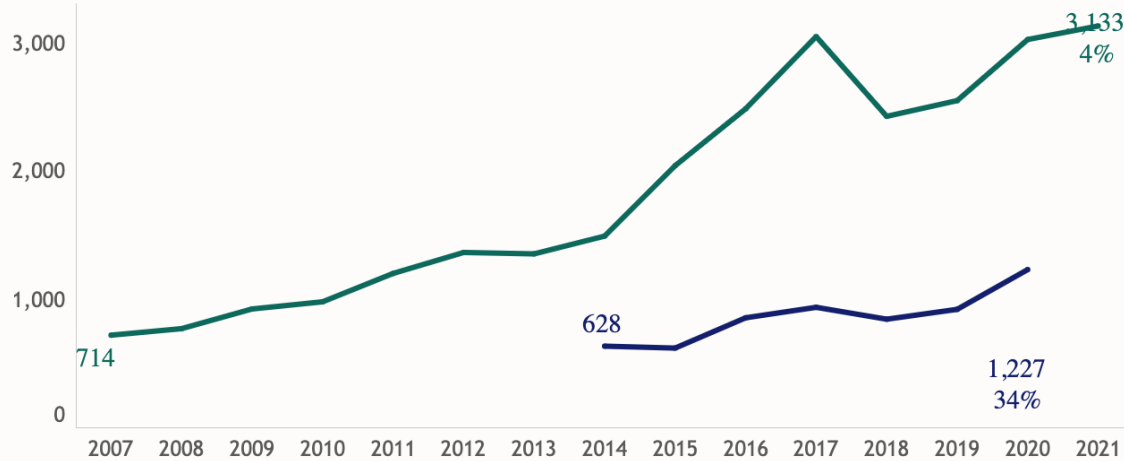
Cen, Xi et al.

- Patients of providers who prescribe higher amounts received roughly 2mg/day morphine equivalents more than the average of 10mg/day after TKA.
- “Among Medicare beneficiaries undergoing total knee arthroplasty, variations in early postoperative prescribing is not associated with meaningful differences in medium- or long-term postoperative opioid utilization.”
- Sample of 604,093 patients treated by 7,141 surgeons across the US, age 65 and older between 2011-2016. (exclusion criteria: less than 25 performed, top 1% utilizers, cancer diagnoses, missing zip code)

August 2022

Statewide Data⁴

Count of Opioid-Related Deaths and Emergency Room Hospitalizations



Hospitalizations

Emergency Room

Inpatient

3,133
2021 Count

1,123
2021 Count

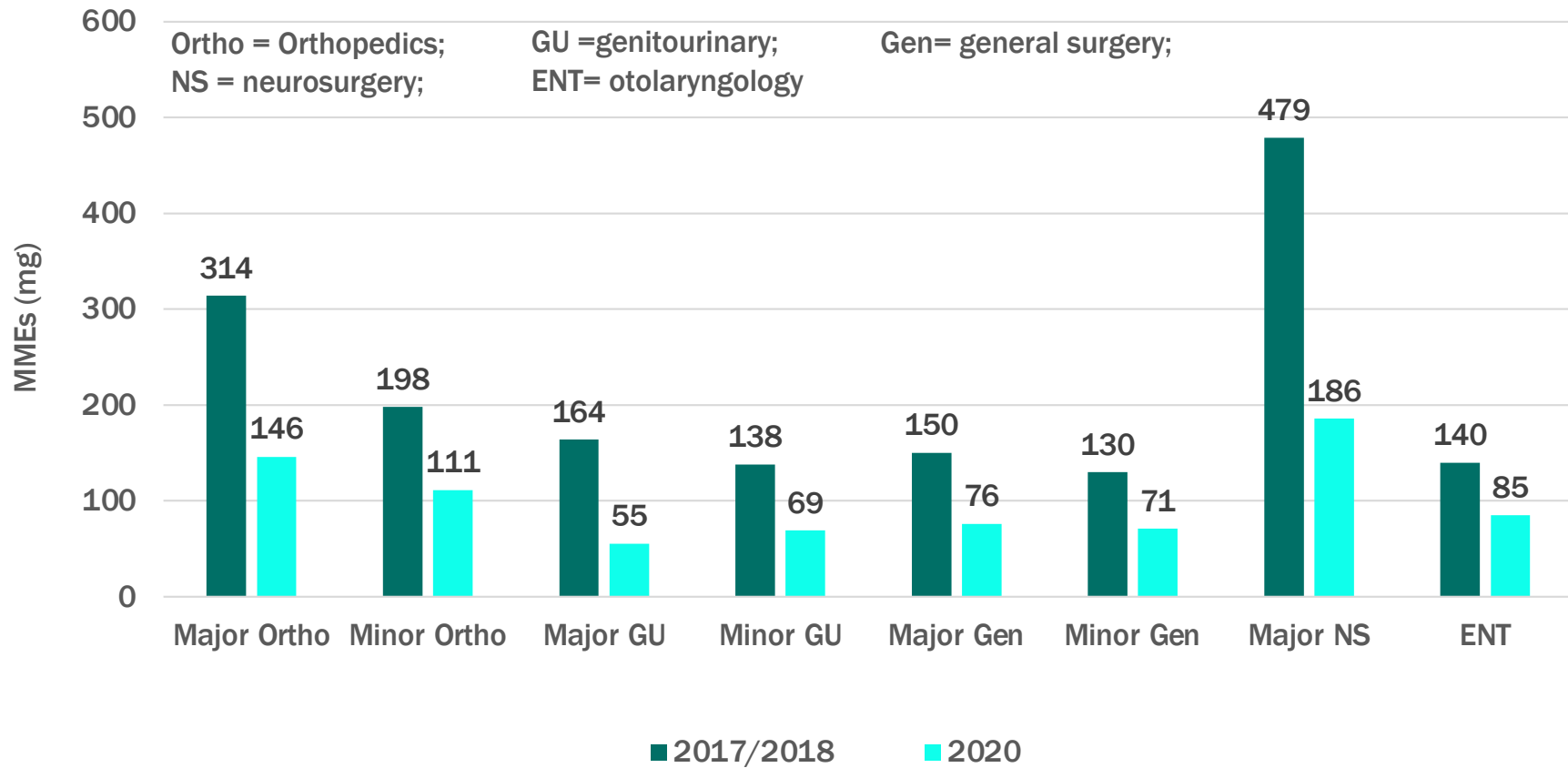
In the last three years (2018 to 2020) the Count of opioid-related deaths in Wisconsin changed by **46.2%**.

WDOH, June 2022

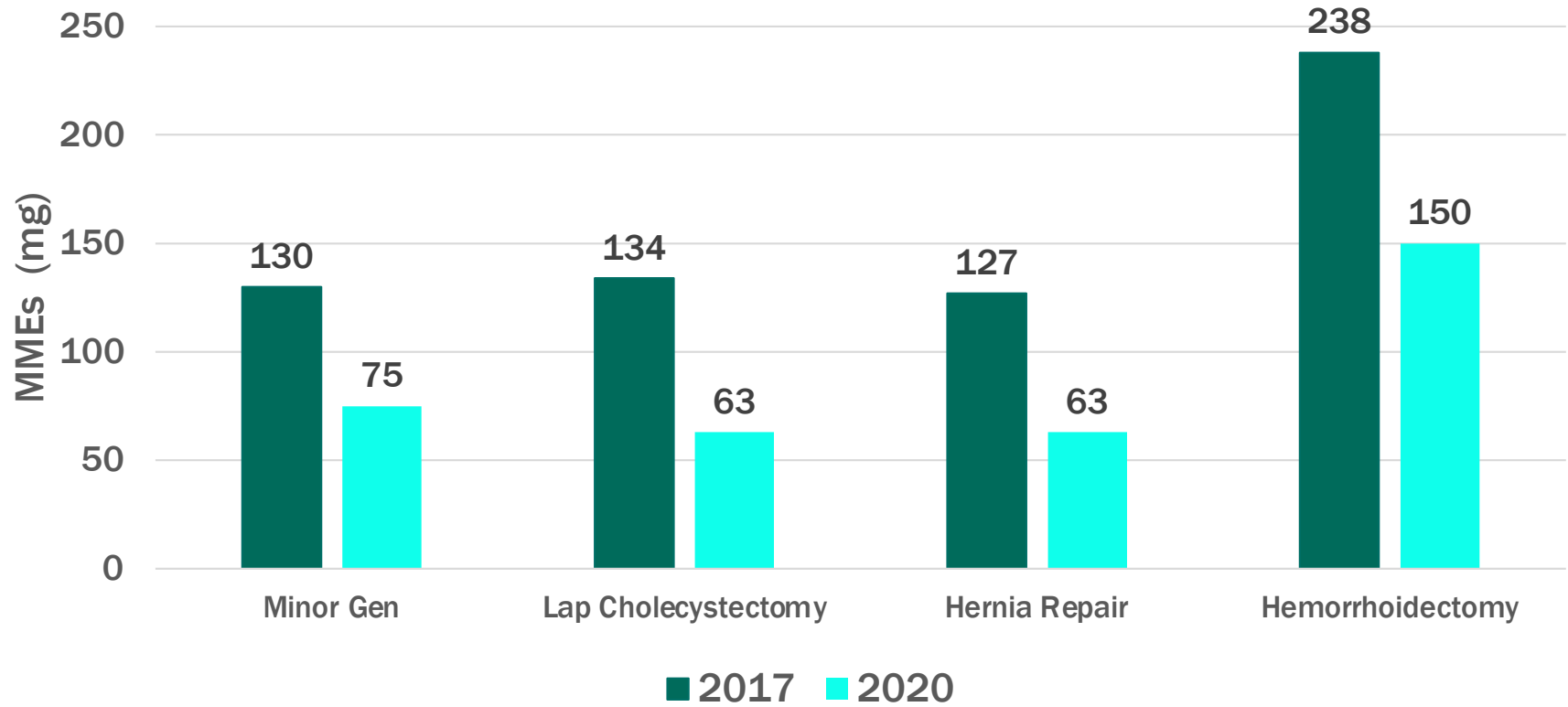


Recent Data from Milwaukee VAMC

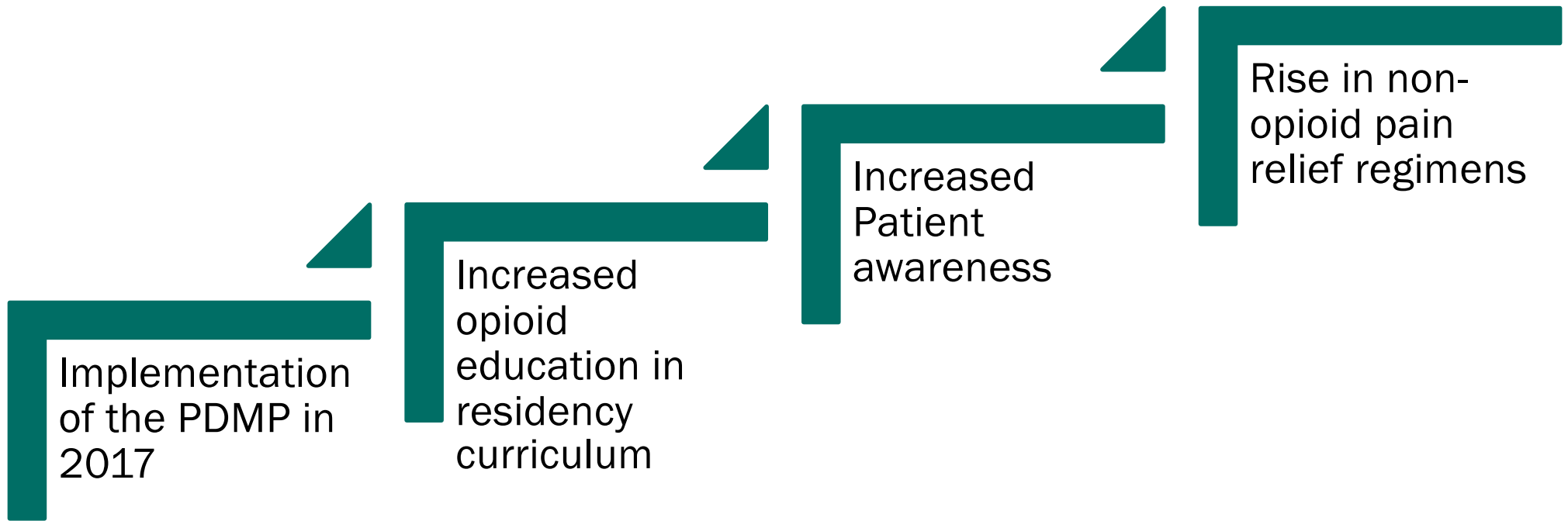
Average MMEs Prescribed on Discharge



Average MMEs for Minor General Surgery

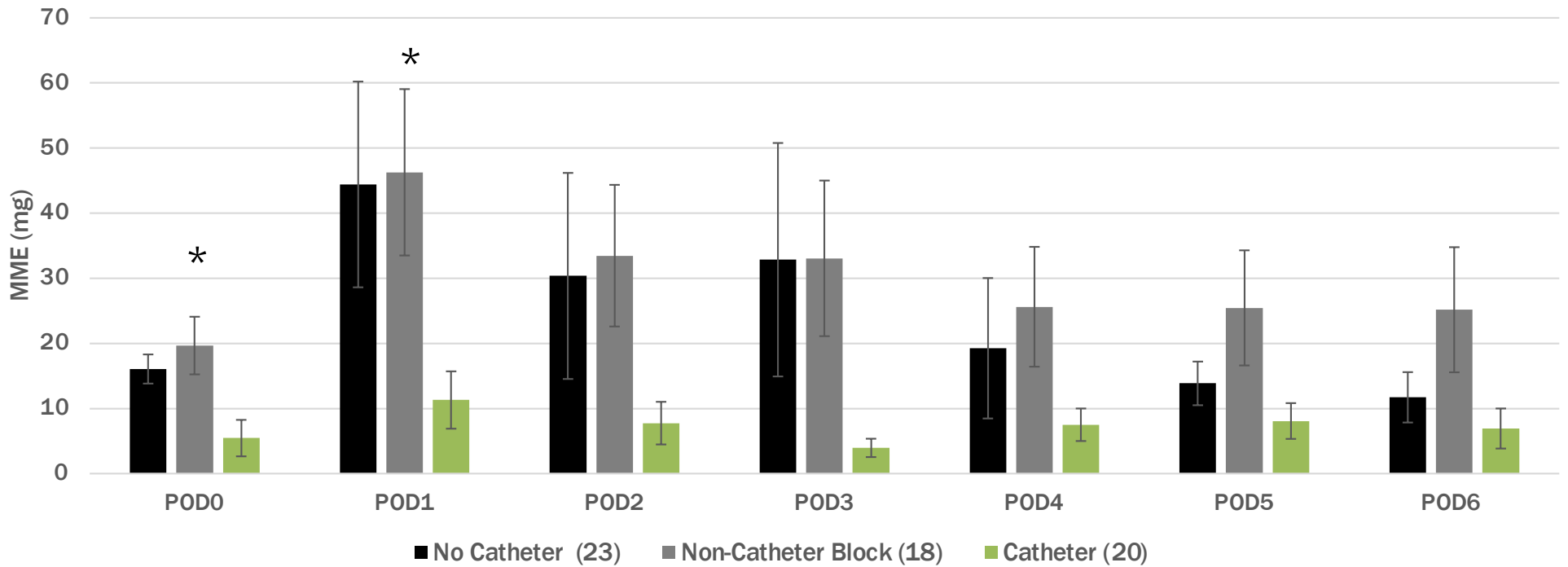


Why the decrease in 2020?



Major Lower Extremity Amputation Regional Pain Catheter Efficacy

MME consumption by post-operative day (POD)



Key Takeaways:



For the individual patient:

Variation in post-surgical opioid prescribing is not related to long-term utilization. (Higher initial prescription \neq persistence)

For medication stewardship:

Postoperative opioid prescription reduction presents an opportunity to reduce community supply.



References:

1. Mclsaac, Daniel I., and Karim S. Ladha. “Postoperative Opioid Prescribing: Finding the Balance.” *Anesthesiology*, vol. 137, no. 2, 2022, pp. 131–133., <https://doi.org/10.1097/aln.0000000000004297>.
2. Cen, Xi, et al. “Surgeon Variation in Perioperative Opioid Prescribing and Medium- or Long-Term Opioid Utilization after Total Knee Arthroplasty: A Cross-Sectional Analysis.” *Anesthesiology*, vol. 137, no. 2, 2022, pp. 151–162., <https://doi.org/10.1097/aln.0000000000004259>.
3. Pena, Joseph J., et al. “Introduction of an Analgesia Prescription Guideline Can Reduce Unused Opioids after Cardiac Surgery: A before and after Cohort Study.” *Journal of Cardiothoracic and Vascular Anesthesia*, vol. 35, no. 6, 2021, pp. 1704–1711., <https://doi.org/10.1053/j.jvca.2020.12.021>.
4. Wisconsin Department of Health Services. Data Direct, Opioid Summary Module [web query]. Data last updated 6/8/22.

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Questions?

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