

Overprescribing of opioids impacts patient safety and public health

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(Medical Xpress)—A Viewpoint article published recently in the *Journal of the American Medical Association* suggests that the clinical practice of prescribing amphetamines, opioids, and benzodiazepines to treat chronic pain may be contributing to the increase in fatal drug overdoses and the likelihood that those drugs will be diverted to the illegal market.

"Rethinking Opioid Prescribing to Protect Patient Safety and Public Health" was authored by Johns Hopkins Bloomberg School of Public Health researchers G. Caleb Alexander, MD, MS, and Daniel Webster, ScD, MPH, and Stefan P. Kruszewski, MD, of MD & Associates.

"More people in the U.S. die from a drug overdose than they do from motor vehicle accidents and more of those deaths are caused by prescription [opioids](#) than those attributable to cocaine and heroin combined," said Alexander, associate professor of Epidemiology at the Bloomberg School and co-director of the new Johns Hopkins Center for Drug Safety and Effectiveness.

There are measures currently in place to monitor the increasing epidemic of opioid abuse, including limits on the number of opioid prescriptions covered by insurers, requirements that these drugs be supplied through a single physician or pharmacy, and state prescription drug monitoring programs. However, the Viewpoint conveys that unless there is a clinical shift in the widespread use of these medicines, efforts to reduce opioid abuse may not succeed.

"Prescribing opioids as a matter of course for treatment impedes the

opportunity to explore and implement other methods of therapy that could offer relief for millions of Americans who suffer from acute or chronic pain," said Webster, professor of Health Policy and Management at the Bloomberg School. "It also increases the odds these drugs will be misused or diverted from the legal to the illegal market, leading to more addiction and death."

The article reveals there are clear correlations between national trends for prescription opioid sales, admissions for substance abuse treatment, and deaths. It also recommends that existing regulatory and enforcement measures to prevent nonmedical use and diversion should be complimented by changes to clinical guidelines to treat chronic pain that are less reliant on opioids.

"It's evident more research needs to be done to identify alternative approaches to pain management and treatment, but prescribing practices must change to reverse what has become a pervasive epidemic leading to widespread morbidity, mortality, and community strife," Alexander added.

More information: [jama.jamanetwork.com/article.a ...
px?articleid=1391927](http://jama.jamanetwork.com/article.aspx?articleid=1391927)

Provided by Johns Hopkins University Bloomberg School of Public Health

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