

Study: Access to health care increases prescription opioid availability and associated abuse

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Researchers at Indiana University-Purdue University Indianapolis say one way to gauge the extent of prescription opioid pain reliever abuse in any Indiana county is to count the number of health care providers, particularly dentists and pharmacists.

In a study of <u>opioid</u> use and abuse, the researchers said they found that access to <u>health care</u> increases the availability of prescription opioids, which, in turn, is associated with higher rates of opioid abuse and associated consequences.

The study concludes the structure of local health care systems at the county level is a major determinant of community-level access to opioids.

"Our study clearly underscores that the broader problem of prescription opioid abuse in Indiana is, in part, an 'iatrogenic epidemic,' or an unintended and unfortunate byproduct of the evolution of our <u>health care system</u>, medical science and the growth of the pharmaceutical industry," said Eric Wright, who led the study. Wright is a professor and chair of the Department of Health Policy and Management in the Richard M. Fairbanks School of Public Health at IUPUI. He also is director of the Center for Health Policy at IUPUI.

The study's findings will be presented Nov. 5 at the American Public



Health Association annual meeting in Boston.

Prescription opioid abuse is a public health problem in the United States, with the number of prescriptions for opioid pain relievers dispensed in the U.S. climbing dramatically over the past decade. The Food and Drug Administration estimates retail pharmacies filled about 174.1 million prescriptions for immediate- and extended-release opioid pain relievers in 2002. By 2009, this number had risen to 256.9 million.

In Indiana, counties with higher rates of dentists and pharmacists had more per-capita opioid prescriptions. Prior research has shown that dentists are a significant source of opioid prescriptions, which are dispensed by pharmacists, along with prescriptions from other <u>health</u> <u>care providers</u>.

The study focuses on counties within Indiana because of the unique availability of detailed dispensation data from Indiana's prescription drug monitoring program.

The most widely prescribed opioid is hydrocodone (Vicodin), accounting for 68.93 percent of all opioid prescriptions, followed by oxycodone at 11.74 percent, codeine-containing products at 8.52 percent and fentanyl at 2.62 percent.

Prior research has shown that most abusers report they obtained prescriptions on their own or from friends and relatives who had been prescribed opioids.

The researchers cautioned against temptations to use countywide data to generalize results and "blame" individual providers and inappropriate prescribing practices.

"We must be cautious and work with <u>public health</u> and health care



leaders to avoid 'overcorrecting,' unnecessarily restricting the supply of opioids, or inadvertently vilifying or punishing providers who are struggling to meet patients' legitimate clinical needs," Wright said.

Nevertheless, the study points to the importance of working with healthcare provider groups to help them dispense needed medication in ways that meet needs while avoiding potential diversion or misuse, Wright said.

Provided by Indiana University

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