

Minority patients less likely to receive analgesic medications for abdominal pain

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New research indicates that minority patients seeking care in the emergency department were 22-30 percent less likely than white patients to receive analgesic medication.

A new study led by researchers at the Center for Surgery and Public Health at Brigham and Women's Hospital that analyzed data from 6,710 [emergency department](#) (ED) visits that occurred between 2006 and 2010 has found that [minority patients](#) with [acute abdominal pain](#) are less likely to receive analgesic (pain-relieving) medications, compared to their white counterparts. The findings appear in the December issue of *Medical Care*.

"We found that minorities experience significant disparities with regard to the receipt of analgesic medications for abdominal pain; [black patients](#) had the greatest increased odds of undertreatment for pain among the groups considered. Black and Hispanic patients experienced prolonged ED lengths of stay and were less likely to be hospitalized for their ailments," explained Adil Haider, MD, MPH, Kessler Director of the Center for Surgery and Public Health at Brigham and Women's Hospital and last author of the study. "These findings add to the overwhelming evidence that racial/ethnic disparities not only exist, but are endemic in health care settings."

The study analyzed data from the Centers for Disease Control and Prevention's National Hospital Ambulatory Medical Care Survey that included patients over the age of 18 who were seen for [abdominal pain](#)

at 350 EDs across the country. The survey included more than 175,000 ED visits, representing a weighted national sample of 625 million ED visits. Among the included visits, 61.2 percent of the patients were white, 20.1 percent black, 14 percent Hispanic, and 4.7 percent belonged to other racial/ethnic groups. Researchers compared the rates of analgesic medication use among these racial/ethnic groups, and accounted for differences in patient and hospital characteristics.

Researchers report that overall, white patients were most likely to receive any analgesic medication: 56.8 percent, compared to 52.8 percent for Hispanic patients, 50.9 percent for black patients, and 46.6 percent for those of other racial/ethnic groups. White patients were more likely to receive narcotic analgesic drugs than black patients, despite similar rates of severe pain. After adjusting for other factors, blacks, Hispanics, and patients of other races/ethnicities were 22-30 percent less likely to receive any analgesic medication, and 17-30 percent less likely to receive narcotic analgesics when compared to white patients.

The study also found that relative to [white patients](#), black, Hispanic, and other patients were more likely to experience longer ED waiting and visit times, and less likely to be admitted to the hospital.

"Particularly important is the fact that these differences in pain medication use were concentrated in hospitals that treated the largest percentages of minority [patients](#) and among those reporting the severest pain, indicating that hospital-level factors may play an important role in eliminating disparities" said Haider. "I believe that equality is the cornerstone of medicine, and that it is our responsibility as healthcare providers to address disparities head-on not just in pain management but in all aspects of care, as we continually develop and improve our health care delivery models."

Provided by Brigham and Women's Hospital

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