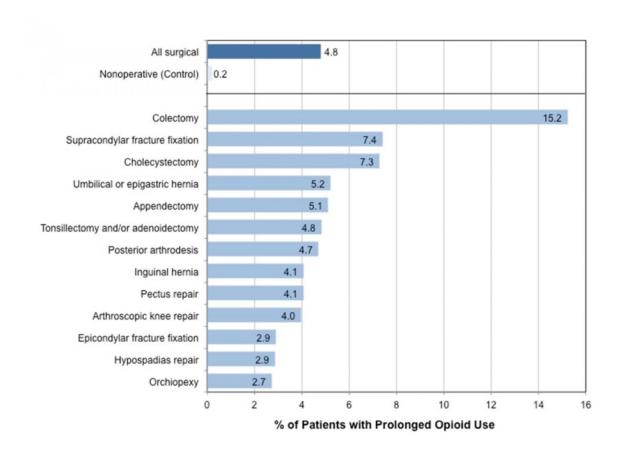


Study finds common surgeries may serve as pathway to nonmedical opioid use in adolescents

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Results of study, the first known to suggest long-term opioid use after surgery may be a significant problem for teens and young adults, shows youth patients commonly fill post-surgical painkiller prescriptions for months beyond typical recovery times. Credit: Calista Harbaugh, M.D; American Academy of



Pediatrics National Conference and Exhibition; University of Michigan C.S. Mott Children's Hospital.

Research being presented at the American Academy of Pediatrics 2017 National Conference and Exhibition shows that post-surgical opioid pain medications prescribed after common surgeries may become a pathway to continued, nonmedical opioid use by teens and young adults.

The study abstract, "Persistent Opioid Usage among Pediatric Patients Following Surgery in the United States," will be presented on Sunday, Sept. 17, at the Marriott Marquis Chicago.

Researchers examined data including nearly 90,000 privately insured U.S. patients between ages 13 and 21 (averaging age 17) with no previous opioid prescriptions who underwent one of 13 common surgeries for this age group, compared with a control sample. They looked for persistent opioid use, defined as continued prescription refills 90 to 180 days after the surgical procedure and beyond what is expected after routine surgery.

They found the incidence of new persistent opioid use following surgery was 4.8 percent, ranging from 2.7 percent to 15.2 percent across procedures, as compared to 0.1 percent in the nonoperative control group.

Gallbladder removal and colon surgery were among procedures associated with highest risk of new persistent opioid use, said lead abstract author Calista Harbaugh, M.D., a general surgery resident at the University of Michigan Medical School and pediatric surgery researcher at C.S. Mott Children's Hospital and the Michigan Opioid Engagement Network. In addition, they found older youth with additional chronic



conditions, depression, anxiety or prior substance use disorders were at higher risk.

"Opioids are commonly prescribed for pain after surgery, and until recently it was generally believed they were not addictive," Harbaugh said. Recent research has shown that many adults are chronically using opioids after surgery, she said, but this is the first to show that long-term opioid use may also be a significant problem for adolescents and young adults who have surgery.

"The study is an important step toward recognizing that the opioid epidemic is affecting adolescents and young adults in a major way," Harbaugh said, noting that when a refill is provided, the opioid pills may have been used, or they may have been saved or given to someone else in the community.

"Most adolescents who misuse prescription opioids get the pills from leftover prescriptions of their family, friends, or their own," she said. "We need to make sure that we treat pain after <u>surgery</u>, but it must be balanced with the risk of providing more opioid than necessary to patients and their communities."

More information: Abstract Title: Persistent Opioid Usage among Pediatric Patients Following Surgery in the United States

Provided by American Academy of Pediatrics

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