

# Prescription drug monitoring program may not cut opioid use

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(HealthDay)—Implementation of a mandatory prescription drug

monitoring program (PDMP) does not necessarily reduce the overall rate of opioid prescribing or the mean number of pills prescribed for patients undergoing general surgical procedures, according to a study published online Aug. 22 in *JAMA Surgery*.

Ryland S. Stucke, M.D., from Dartmouth-Hitchcock Medical Center in Lebanon, N.H., and colleagues conducted a prospective observational cohort study at an academic hospital among 1,057 patients undergoing representative elective general surgical procedures from July 1, 2016, to June 30, 2017. Beginning Jan. 1, 2017, new state legislation mandated the use of a PDMP and [opioid](#)-risk assessment tool for all patients receiving an outpatient opioid prescription.

The researchers found that there was no significant reduction in the percentage of patients prescribed opioids after surgery before versus after the new requirements (80 versus 77 percent;  $P = 0.29$ ). In the six months before the mandatory PDMP requirement, the mean number of opioid pills prescribed decreased from 30.8 to 24 (22.1 percent); in the six months after the legislation, the decrease was less, from 22.8 to 21.9 pills (3.9 percent). No high-risk [patients](#) who subsequently were not prescribed opioids were identified by the new requirements.

"A PDMP can be a useful adjunct in certain settings, but this study found that it did not have the intended effect in a population undergoing elective surgical procedures," the authors write.

**More information:** [Abstract/Full Text](#)

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