

Researchers examine prescription opioid use in patients with chronic kidney disease

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Adults with chronic kidney disease (CKD) have not been immune to the national opioid epidemic, suggests research that will be presented at ASN Kidney Week 2018 October 23-October 28 at the San Diego Convention Center.

Patients with CKD may be more likely to receive opioid prescriptions due to a high prevalence of pain and frequent contact with healthcare systems. To uncover trends in prescription opioid use in the CKD population over time, Daniel Murphy, MD (University of Minnesota) and his colleagues analyzed 1999-2014 information on patients with CKD participating in the National Health and Nutrition Examination Survey.

In the years 1999 to 2014, adults with CKD in the United States had a higher likelihood of having an active prescription for and to be using an [opioid medication](#) compared with those without [kidney disease](#) (7.5% vs 5.4%). After statistical adjustment for demographic factors, a higher prevalence of prescription opioid use was also seen among those with CKD in the years 2011-2014 compared with 1999-2002. No effect by race/ethnicity was seen, although higher prescription opioid use was seen with females and with older age.

The researchers also found that multiple comorbid conditions were associated with higher prevalence of prescription opioid use in patients with CKD, including those known to cause pain (such as cancer and arthritis), as well those that should not directly cause pain (such as

diabetes, hypertension, and obesity).

"Our research suggests the need for further work investigating the indications for opioid prescribing and the outcomes associated with use of prescription opioids in those with CKD," said Dr. Murphy.

Another study found that several environmental factors are associated with long-term prescription opioid use among elderly patients with CKD. For the study, Yun Han, MD (University of Michigan) and her colleagues analyzed a linked dataset from Medicare 5% sample claims data from 2006-2009), the American Community Survey Data from 2005-2009, and the Health Resources and Services Administration Primary Care Service Area data from 2007.

Average county-level long-term opioid use was higher in counties in the West and South compared with those in the Northeast and Midwest. Counties with aging adults and higher deprivation index tended to have greater long-term opioid use, as did counties in Medically Underserved Areas.

"Our results highlight the importance of allocating resources for this epidemic at the county level. The environmental factors identified in our study may be helpful for healthcare providers to target CKD patients at high risk of opioid abuse/dependence, and for designing local regulation and treatment for appropriate [opioid](#) use in CKD patients," said Dr. Han.

Provided by American Society of Nephrology

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