

Opioid prescriptions almost twice as likely for rural vs. urban Americans

January 17 2019, by E.j. Mundell, Healthday Reporter



(HealthDay)—As the United States battles an epidemic of opioid abuse,



people living in rural areas have nearly two times the odds of being prescribed the painkillers when compared to their urban peers.

That's the finding from a new study that suggests more must be done to curb opioid prescribing by doctors in rural America.

The research was based on 2014-2017 data from Athenahealth, a major data management firm for doctors' offices and hospitals nationwide. The company's services help manage the medical files of more than 86 million patients nationwide.

The new study found that, overall, <u>prescriptions</u> for opioid medications have been declining, especially since March of 2016, when the U.S. Centers for Disease Control and Prevention issued new prescribing guidelines.

But the decline hasn't been the same everywhere, according to researchers led by CDC investigator Macarena Garcia. Her team reports that patients in "the most rural counties had an 87 percent higher chance of receiving an <u>opioid prescription</u> compared with persons in large central metropolitan counties during the study period."

Combining all areas covered by the analysis, 7.4 percent of patients received an opioid prescription during the period between January 2014 and January 2015.

By the end of the study—a period from March 2016 through March 2017—that rate had fallen to 6.4 percent, Garcia's team reported.

However, a big gap remained in terms of prescribing rates for rural versus urban Americans.

By March of 2017, just 5 percent of patients living in the most urban



counties had received an opioid prescription over the past year, compared to 9 percent of those in the most rural counties, the investigators found.

Two addiction experts said the findings show more must be done to reach rural areas hard-hit by the opioid scourge.

"The study provides a wake-up call regarding the prescribing habits among primary care providers, and the stark contrast in rural compared to urban settings," said Dr. Robert Glatter, an emergency physician at Lenox Hill Hospital in New York City.

"Armed with this data, it's clear we need to develop interventions and direct resources to make changes in prescribing preferences in rural settings," he said.

Dr. Harshal Kirane directs addiction services at Staten Island University Hospital, also in New York City. He called the overall decline in opioid prescriptions "encouraging news."

But Kirane added that reductions in opioid prescription rates could have unforeseen negative consequences, especially in underserved <u>rural areas</u>.

"In communities with limited access to addiction treatment, decreased access to prescription opioids can contribute to a surge in demand for heroin or illicit opioids," Kirane said.

So, if the aim is to encourage rural physicians to write fewer <u>opioid</u> prescriptions, "resources and support must be given to expand access to addiction care," he explained.

Addiction care services that work include "overdose education, naloxone [Narcan and Evzio] distribution and medication-assisted treatment



services," Kirane said.

The new report was published Jan. 18 in the CDC's *Morbidity and Mortality Weekly Report*.

More information: Robert Glatter, M.D., emergency physician, Lenox Hill Hospital, New York City; Harshal Kirane, M.D., director, addiction services, Staten Island University Hospital, New York City; Jan. 18, 2019, *Morbidity and Mortality Weekly Report*

The U.S. National Institute on Drug Abuse has more about the <u>opioid</u> <u>crisis</u>.

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Citation: Opioid prescriptions almost twice as likely for rural vs. urban Americans (2019, January 17) retrieved 3 May 2024 from <u>https://medicalxpress.com/news/2019-01-opioid-prescriptions-rural-urban-americans.html</u>

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