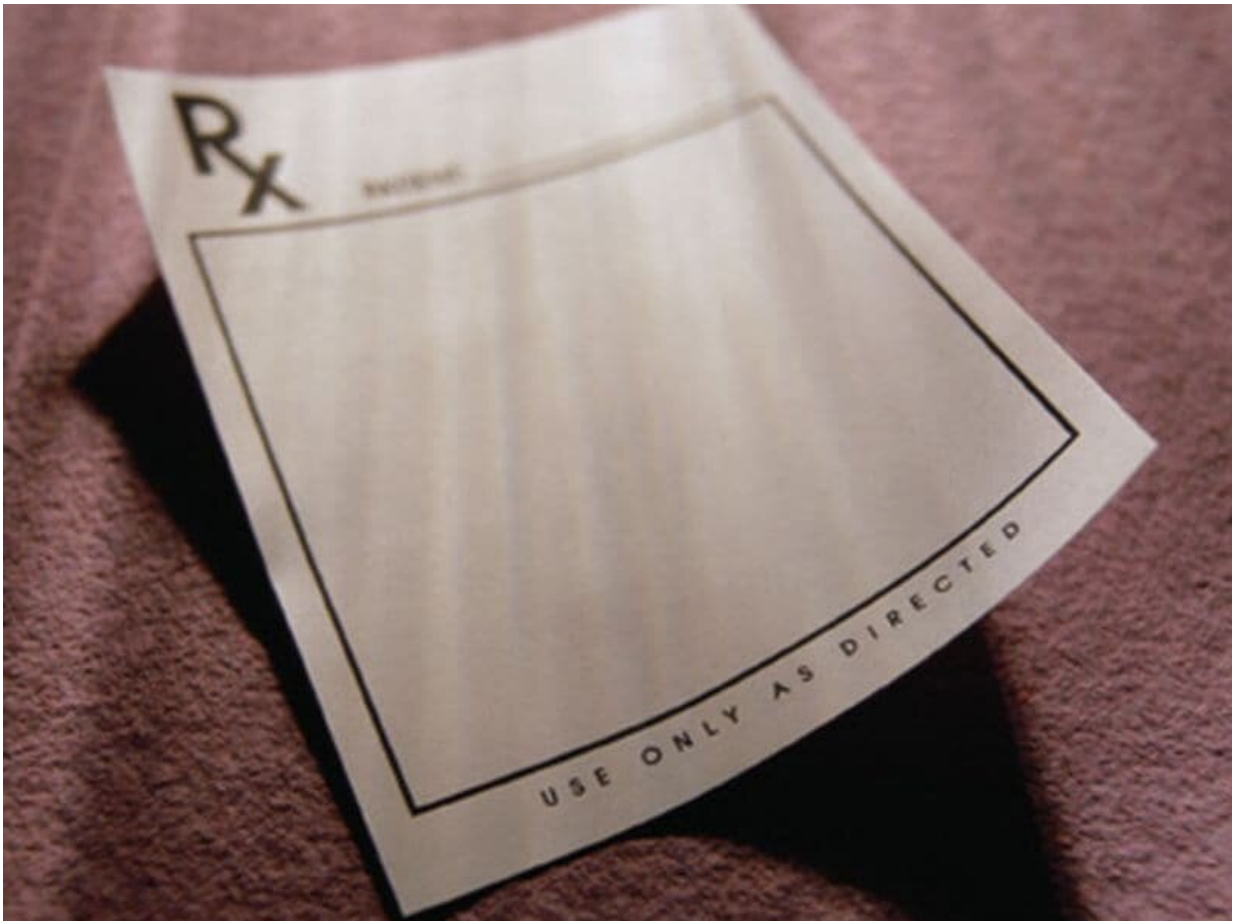


Patient factors may predict opioid use after discharge

September 13 2019



(HealthDay)—Certain factors may help clinicians identify which

patients are more likely to have greater opioid use in the first month after major surgery, according to a study published online Aug. 5 in the *Annals of Surgery*.

Daniel B. Larach, M.D., from the University of Southern California in Los Angeles, and colleagues sought to determine preoperative patient characteristics associated with postoperative outpatient [opioid](#) use one month following hysterectomy, [thoracic surgery](#), and total knee and hip arthroplasty. Additionally, the frequency of postoperative opioid overprescribing was assessed. The analysis included 1,181 patients, of whom 1,001 had complete primary outcome data and 913 had complete phenotype self-report data.

The researchers found that younger age, nonwhite race, lack of a college degree, higher anxiety, greater sleep disturbance, heavy alcohol use, current tobacco use, and larger initial opioid prescription size were significantly associated with increased opioid consumption. The median total oral morphine equivalents prescribed was 120 5-mg hydrocodone pills, whereas the median opioid consumption was 38 pills.

"There is not much research on which surgical patients require more or less opioids, despite a push in the field for personalized medicine. Often with [postoperative](#) opioid prescribing, personalization falls by the wayside, with surgeons using the same amounts for every person receiving a certain procedure," Larach said in a statement. "We found that anxiety is linked with more opioid use, which is disheartening to see but also heartening in the sense that this is something we could potentially target."

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

Citation: Patient factors may predict opioid use after discharge (2019, September 13) retrieved 24 April 2024 from

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