

Oxycodone prescriptions after delivery not linked to longer-term opioid use compared to codeine

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Postpartum prescriptions for oxycodone were not associated with increased risk of longer-term opioid use compared to codeine prescriptions, according to new research published in *CMAJ* (*Canadian*

Medical Association Journal).

Over the last 10 years, there has been a shift to fewer [codeine](#) prescriptions and an increase in prescriptions for stronger opioids, such as hydrocodone, hydromorphone and oxycodone for patients postpartum.

"This occurred in part because of safety concerns related to the use of codeine while breastfeeding, which have since been questioned," writes Dr. Jonathan Zipursky, Sunnybrook Health Sciences Center, ICES and the University of Toronto, Toronto, Ontario, with co-authors. "The consequences of this trend on postpartum health have not been well characterized but are potentially concerning, for several reasons. Principally, patients have a strong expressed preference for oxycodone over other prescription opioids, which may impart a greater potential for nonmedical use."

To understand whether this emphasis on more potent opioid prescribing is linked to persistent opioid use after giving birth, researchers looked at data on 70,607 individuals who filled an opioid prescription after discharge from an Ontario hospital between 2012 and 2020. More than two-thirds, 49,299 (70%), received oxycodone and 21,308 (30%) received codeine. The majority (56,485 [80%]) had cesarean deliveries.

Compared to codeine, receipt of oxycodone was not associated with persistent opioid use after delivery (relative risk 1.04; 95% confidence interval 0.91–1.20).

In secondary analyses, the researchers found a 60% increase in the risk of persistent opioid use among people prescribed oxycodone compared with codeine after vaginal delivery, but no such association for those who delivered by cesarean. This finding warrants further research to explore why those who deliver vaginally may be at greater risk of using

opioids longer term following [oxycodone](#) use after delivery. Higher dosages and longer duration of a prescription were also associated with increased risk of persistent opioid use.

"Our findings suggest that initial [postpartum](#) prescriptions containing large amounts of [morphine milligram equivalents] might represent an additional risk factor for persistent opioid use. Therefore, limiting the quantity of initial opioid prescriptions might be an additional strategy to reduce the risk of new, persistent [opioid](#) use after [delivery](#)," the authors suggest.

More information: Jonathan S. Zipursky, et al. Prescription of oxycodone versus codeine after childbirth and risk of persistent opioid use: a population-based cohort study, *Canadian Medical Association Journal* (2023). [DOI: 10.1503/cmaj.221351](https://doi.org/10.1503/cmaj.221351)

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