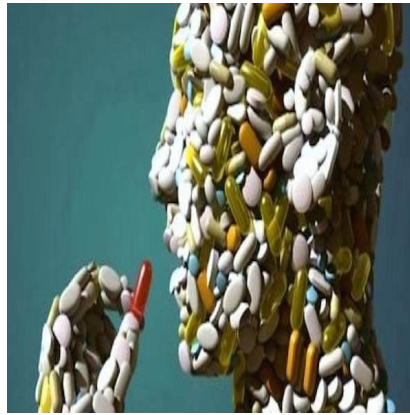




Only Half of Physicians Use Prescription Drug Monitoring Programs



State databases that monitor prescription medications to prevent the abuse and misuse of controlled substances are used by only half of physicians, despite widespread awareness of such programs. According to a new national survey, barriers include difficulties in database usability and limited interactions across state borders. The study has been published in the March issue of the journal *Health Affairs*.

The survey, conducted by researchers at the Johns Hopkins Bloomberg School of Public Health, questioned 420 primary care physicians about their awareness of and participation in their states' prescription drug monitoring programs. Just over half (53 percent) reported using their state's program, although 72 percent said they were aware of the programs. Every state but Missouri currently has a prescription drug monitoring program in place.

The prescription drug epidemic in the United States and elsewhere could benefit from interventions designed to monitor "doctor shoppers" who attempt to obtain medications from multiple physicians, whether they use the drugs themselves or sell them to others. It is estimated that a third of first-time opioid users over the age of 12 started with a prescription drug which was not prescribed to them personally.

Drug monitoring programs aim to curtail the abuse and misuse of prescription drugs, but the success of such programs depends on physicians being aware of them and actually using them, according to lead author Lainie Rutkow, JD, PhD, associate professor at the Bloomberg School's Department of Health Policy and Management. The research was supported by the Robert Wood Johnson Foundation Public Health Law Research Program.

According to the survey, 22 percent of physicians reported not knowing about their state's prescription monitoring program. A possible explanation for that figure could be the relative newness of many statewide programs. Most were introduced in the past decade, and many are still in various stages of rollout, with 12 states introducing the programs in the past three years.

“While awareness of the programs is relatively high, barriers exist. The information in our report about the barriers physicians face will give states something to focus on,” Rutkow said.

Some states place the burden of use on the doctor instead of allowing proxies to be appointed to access the databases. Most physicians (74 percent) said the data were easy to access, but 58 percent said it was too time-consuming to retrieve the data. In addition, data are not always clearly presented, which complicates interpretation; 28 percent the information is not in a format that is easy to use.

State-to-state data sharing is another issue which can be improved in the future. “It’s a goal of course to ultimately have interstate interaction, especially in large urban areas that span multiple states,” said Rutkow.

Additional authors of the study are Lydia Turner, Catherine Hwang and G. Caleb Alexander, who is supported by the Lipitz Public Health Policy Award from the Johns Hopkins Bloomberg School of Public Health.

Source: [Johns Hopkins Bloomberg School of Public Health](#)

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