Opioid Prescribing Trends - U.S., Canada and Sweden

A recent study, published in JAMA Network Open, reported that U.S. and Canadian patients were seven times more likely to receive an opioid prescription after surgery compared to patients in Sweden. Overprescription of opioids has become a problem in the U.S. and leaves patients at risk of opioid use disorder. This is also evident internationally as overdoses caused by opioids have increased around the globe.

The study led by Penn Medicine researchers assessed the prescription rates for opioids after four different types of low-risk surgeries. These included appendix removal, gallbladder removal, torn meniscus cartilage surgery and breast lump removal. Researchers analysed over 220,000 cases from 2013 to 2016 and noted whether opioid prescriptions were filled between 7-30 days after surgical procedures. In particular, researchers noted patients of similar characteristics and those that had not collected an opioid prescription 90 days before their surgery.

Results found that within a week after discharge, 75% of U.S. and Canadian patients had their opioid prescription filled, whereas this number was only 11% for Swedish patients. One month after surgery, almost half of the U.S. patients assessed had received opioids, whereas this was only 25% in Canada and 5% in Sweden. It was noted that in Sweden, the maximum opioid prescribing rate was 20% at any one time.

Mark D. Neuman, MD, corresponding author on the study, explained how these results show the considerable differences in the way in which opioids are prescribed across the U.S., Canada and Sweden. Neuman suggested that the study could encourage more careful use of opioids in the U.S. and Canada. The study also showed that the U.S. had on average the highest prescribed doses of opioids (247 MME), with much lower average doses noted in Canada (169 MME) and Sweden (197 MME).

Researchers also found significant differences in the types of opioids prescribed in the three different countries. Codeine and tramadol were the most popular options in Canada and Sweden, accounting for 58% and 45% of opioid prescriptions, respectively; whereas these opioids were only prescribed for 7% of cases in the U.S. The study highlights differences in attitudes when it comes to prescribing these ‘weaker’ opioids, however evidence has confirmed that there is still a high chance of misuse with these drugs as well. The most prescribed opioids in the U.S. were hydrocodone and oxycodone.

Dr. Karim Ladha, a co-author on the study, emphasised the systematic differences in opioid prescribing across the three countries. Ladha went on to explain how these results show the different attitudes towards pain treatment and also shows how drugs are marketed and regulated in different countries.

Whilst this study offers suggestions on opioid prescription attitudes, no research was conducted on the quality
of this pain management and its effects on patients. However, prior studies suggest that this should not have an effect on pain treatment quality.

Source: Penn Medicine
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