

Prescription Opioids Involved in Most Overdoses Seen in EDs



Researchers have analysed data on US hospital emergency department visits for opioid overdoses and found that the largest portion of the overdoses (67.8 percent) involved prescription opioids, followed by heroin, other unspecified opioids and multiple opioids. The findings have been published by *JAMA Internal Medicine*.

According to available data, opioid overdoses are a leading cause of injury-related death in the United States. However, little is known about how opioid overdoses present in emergency departments (EDs) nationally.

For this study, Michael A. Yokell, ScB, Division of Emergency Medicine, Stanford University School of Medicine (Stanford, California) and colleagues examined the 2010 Nationwide Emergency Department Sample using diagnostic codes to define opioid overdoses. Their analysis revealed 135,971 weighted ED visits that were coded for opioid overdose.

Key findings of the Stanford study include:

- Prescription opioids (including methadone) accounted for 67.8 percent of overdoses, followed by heroin (16.1 percent), unspecified opioids (13.4 percent) and multiple opioid types (2.7 percent).
- The greatest proportion of prescription opioid overdoses occurred in urban areas (84.1 percent), in the South (40.2 percent) and amongst women (53 percent).
- The overall death rate was low (1.4 percent) once patients arrived in the ED, which the researchers suggest supports increased use of emergency services for overdoses.

About half of the patients in the study sample who went to the ED for opioid overdoses were admitted to the hospital, and costs for both inpatient and ED care totalled nearly \$2.3 billion. As the authors pointed out: "Opioid overdose exacts a significant financial and healthcare utilisation burden on the US healthcare system. Most patients in our sample overdosed on prescription opioids, suggesting that further efforts to stem the prescription opioid overdose epidemic are urgently needed."

Many patients who overdosed shared common coexisting illnesses, including chronic mental health, circulatory and respiratory diseases. The authors, therefore, recommend that healthcare providers who prescribe opioids to patients with these preexisting conditions should do so with care and counsel the patients.

Opioids are drugs that relieve pain. They reduce the intensity of pain signals reaching the brain and affect those brain areas controlling emotion, which diminishes the effects of a painful stimulus.

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Source: JAMA

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