

# Opioids for Chronic Non-Cancer Pain: Changing the Landscape

Washington State Board of Health  
November 12, 2008

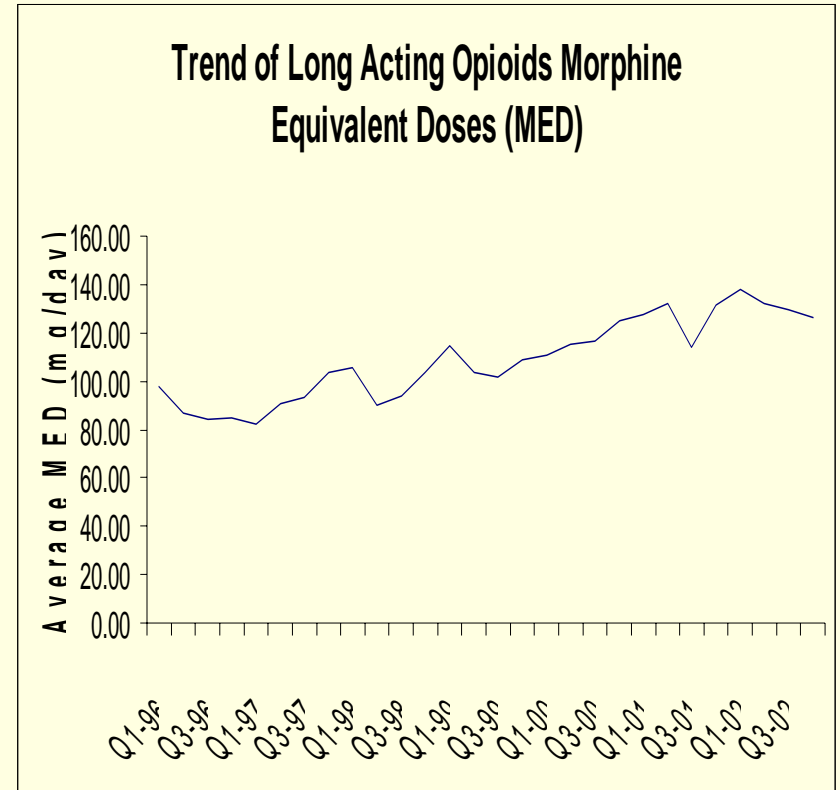
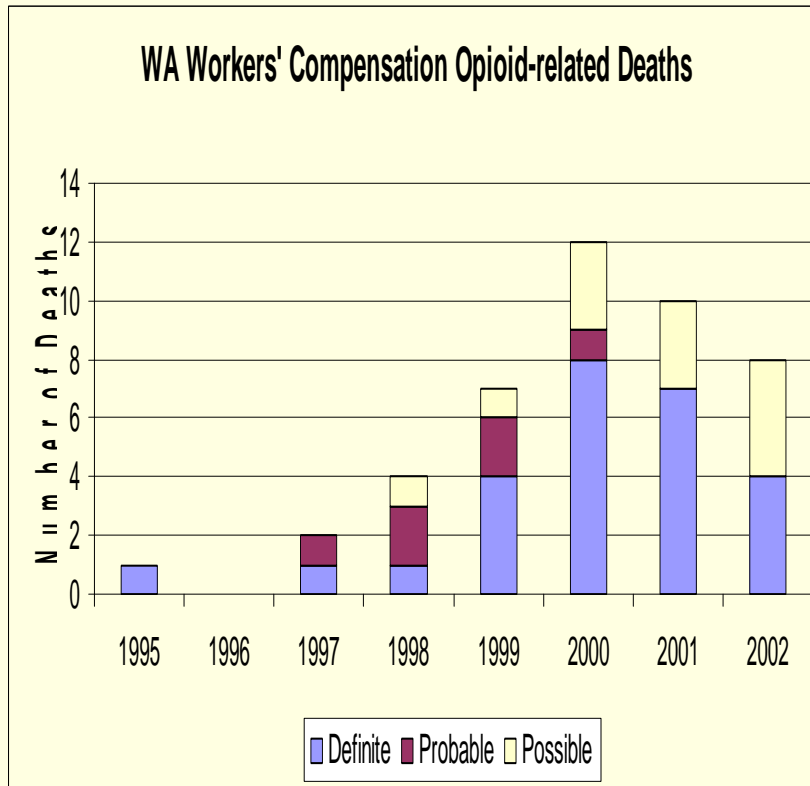
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# Opioids for Chronic Non-cancer Pain

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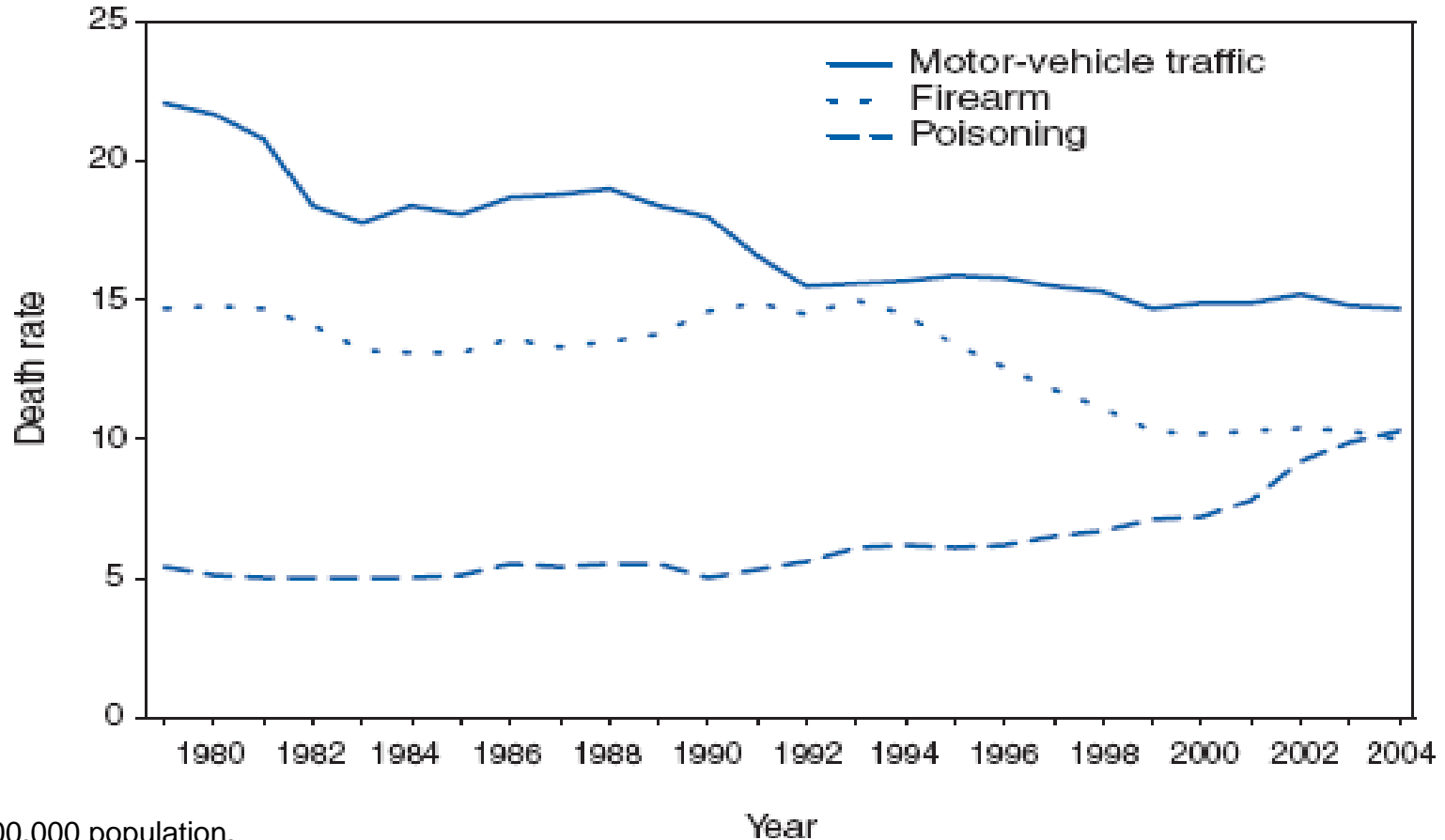
- Most US state regulations changed (1998 for WA) from prohibition of use to use without dosing guidance
- Change in policy most likely due to low grade studies (Portenoy et al.) supporting rarity of true addiction and advocacy on under treatment

# WA Workers' Compensation Experience



Franklin GM, Mai J, Wickizer T, Turner JA, Fulton-Kehoe D, Grant L. Opioid dosing trends and mortality in Washington State workers' compensation 1996-2002. *Am J Ind Med* 2005;48:91-99.

# Leading Causes of Injury Death† by Year - United States 1979-2004



\* Per 100,000 population.

† Coded according to the *International Classification of Diseases, Ninth Revision*, during 1979--1998 and according to the *Tenth Revision* during 1999--2004. Additional information regarding classification of deaths according to intent and mechanism is available at [http://www.cdc.gov/nchs/data/nvsr/nvsr54/nvsr54\\_10.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr54/nvsr54_10.pdf).

# Adverse Drug Events Reported to FDA 1998-2005

**Table 4. Most Frequent Suspect Drugs in Death and Serious Nonfatal Outcomes, 1998-2005**

Drug Name	Rank/Deaths	Drug Class
Death outcome		
Oxycodone	1/5548	Opioid analgesic
Fentanyl	2/3545	Opioid analgesic
Clozapine	3/3277	Antipsychotic
Morphine	4/1616	Opioid analgesic
Acetaminophen	5/1393	Analgesic
Methadone	6/1258	Opioid analgesic
Infliximab	7/1228	DMARD
Interferon beta	8/1178	Immunomodulator
Risperidone	9/1093	Antipsychotic
Etanercept	10/1034	DMARD
Paclitaxel	11/1033	Antineoplastic
Acetaminophen-hydrocodone	12/1032	Combination analgesic
Olanzapine	13/1005	Antipsychotic
Rofecoxib	14/932	NSAID
Paroxetine	15/850	Antidepressant

Moore et al. Serious Adverse Drug Events Reported to the Food and Drug Administration 1998-2005. Arch Intern Med 2007;167(16);1752-1759.

# Other Morbidities Associated with Chronic Opioid Use

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- Sleep apnea
  - 92% prevalence of ataxic or irregular breathing during NREM sleep at  $\geq$  200 mg MED (Walker et al. J Clin Sleep Med 2007;3:455-61)
- Endocrine dysfunction – testosterone deficiency
- Addiction
  - Rate up to 18.9% (Fishbain et al. Clin J Pain 1992;8:77-85)
- Hyperalgesia – abnormal pain sensitivity with chronic opioid use. Frequent cause of failed therapy (Ballantyne J. Pain Physician 2007;10:479-91)

# AMDG Opioid Dosing Guideline

<http://www.agencymeddirectors.wa.gov/opioiddosing.asp>

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- Developed in 2006 by 15 clinical pain specialists in collaboration with the AMDG
  - **Part I-** if patient has not had clear improvement in pain AND function at 120 mg MED, “take a deep breath”
  - **Part II-** guidance for patients already on opioid doses exceeding 120 mg MED
  - **Innovations-** opioid dosing calculator and free CMEs
- It is an **Educational Pilot**

# Opioid Dosing Guideline Evaluation

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- Subgroup of expert clinicians will advise evaluation
- Evaluation ideas:
  - Degree of diffusion, including geographic distribution of “hits” on website
  - Survey of primary care providers to determine usefulness
  - Opioid dosing patterns
  - Deaths
- Determine educational impact and further actions

# Next Steps

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- CDC summit on state strategies for overdose prevention – January 13 and 14, 2009
- CDC grant to study prevention of unintentional poisonings from drug overdoses
  - Evaluating the AMDG Opioid Dosing Guidelines is mentioned as one of eight objectives
- Possible legislation?

# Utah House Bill 137-

## Pain Medication Management and Education

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- 2-year program in Utah DOH
  - Research on causes, risk factors, and solutions for deaths and nonfatal complications of prescription opioid use and misuse in Utah
  - Create practice guideline on chronic pain management
  - Educate on safer use of opioids (healthcare providers, patients, insurers and general public)
  
- By 2009, reduce deaths from Rx opioids by 15%



Thank You