THE WAR ON PAIN

vs

THE WAR ON DRUGS

OPIOIDS
• ABUSE
• DIVERSION
• CHILDREN

In Arizona, 1 out of 4 12th graders abuse prescription pain relievers – twice the national rate

GUIDELINES
• Effective Patient Evaluation
• Treatment Plan
• Informed Consent & Agreement
• Periodic Review
• Referral & Patient Management
• Documentation
• Compliance With Relevant Law

RESPONSIBLE OPIOID PRESCRIBING
• Text and 7.25 CME Credits
• Author – Scott M. Fishman, M.D.
• Sponsors:
  Federation of STATE MEDICAL BOARDS
  Alliance of STATE PAIN INITIATIVES
  University of WISCONSIN SCHOOL of MEDICINE and PUBLIC HEALTH

PURCHASE BOOK: www.fsmb.org/Pain/default.html

PERIODIC REVIEW
Monitoring for COMPLIANCE
• Adherence to Agreement
• Urine Drug Testing
• State Prescription Monitoring Program
• Predictors of Drug Abuse
• Aberrant Behavior

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URINE DRUG TESTING

- Support Assessment & Diagnosis
- Monitor Adherence
- Identify Use of Undisclosed Substances
- Patient Advocacy
- Uncover Diversion

URINE DRUG TESTING

- Unannounced
- Questions prior to requesting drug test
  - Time of last dose, Rx drugs, OTC drugs, borrowed medications, herbs, illicit drugs, alcohol
- In-house specimen
- Disadvantages of point-of-care/dipstick testing

URINE DRUG TESTING

- 45% abnormal tests
- 20.2% illicit substances
- 14.5% additional drugs
- 10.2% missing prescribed opioids

Validity of Specimen

- Temperature within 4 minutes
- Creatinine, pH, specific gravity
- Adulterants
- Patient behavior
- False positives & False negatives
- Metabolites

NO URINE
NO PRESCRIPTION
NO EXCEPTIONS

CONTROLLED SUBSTANCE PRESCRIPTION MONITORING PROGRAM
REMS
RISK EVALUATION & MITIGATION STRATEGY

FDA
Long Acting Opioids

PREDICTORS OF DRUG ABUSE
- Personal & family history of prescription, alcohol & illegal drug abuse
- Age (16 to 45)
- History of preadolescent sexual abuse
- Cigarette smoking
- Criminal behavior
- Presence of psychiatric disorder
- Race, income, education, literacy NOT usually factors

ABERRANT BEHAVIOR
• APPEARANCE
  - Unkempt, disheveled
  - Sleepy looking
  - Nervous or jittery
  - Itching face or extremities with or without skin pathology
  - Unexplained weight loss
  - Tracks

• BIOLOGICAL ISSUES
  - Appears intoxicated, smell of alcohol
  - Abnormal urine drug test

• PSYCHOLOGICAL ISSUES
  - Negative mood changes
  - Isolation
  - Unusual behavior identified by family members
  - Demanding behavior
  - Abusive behavior in office or pharmacy or over telephone
  - Manipulative behavior
  - “End of world” behavior regarding medications

• ACTIVITY ISSUES
  - Requests medications by name. I want ______. It’s the only thing that works. Methadone, Soma
  - Abusing alcohol or drugs
  - Involved in lawsuits — “I’ll sue you” attitude
  - Contact with street culture
  - Arrested
ABERRANT BEHAVIOR
Lost or stolen prescriptions/medications
Request early or frequent refills
Visits multiple doctors seeking medications
Multiple Emergency Room visits
Weekend telephone calls to your answering service
Late Friday afternoon office visits
Fills opioid medication but not adjunctive medication prescriptions

ABERRANT BEHAVIOR
Non-compliant in obtaining past medical records
Resists drug tests, pill counts, lab tests
Misses or postpones appointments
Aggressive complaining
Selling medication
Stealing or borrowing another’s prescription drugs

ABERRANT BEHAVIOR
• MEDICATION ISSUES
  Changes route of administration – crush/snort/inject
  Unusual interest in potential abuse issues
  Increases dose without authorization
  Purposeful oversedation
  Medication hoarding
  Using medication in response to situational stressors

ABERRANT BEHAVIOR
  Forged or altered prescriptions
  Requests short acting rather than long acting opioid
  Asks for “something for my nerves”

INFORMANTS
• Family members
• Pharmacist
• Check other insurances – VA, auto injury, private insurance vs worker’s compensation