NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL

Patterns of Postoperative Opioid Dispensing for Common Surgical Procedures among Medicaid Beneficiaries in 2020-2021

HSD27

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Background

- Unnecessary opioid prescribing to patients undergoing surgical procedures increases the risk of opioid-related adverse events.
- Several opioid prescribing recommendations and guidelines have been released since 2018. However, their implementations at the clinical settings is unknown.

Objective

- Examine the procedure-specific opioid prescribing for postoperative pain among Medicaid beneficiaries in 2020-2021.
- Compare the 2020-2021 prescribing patterns with the findings from a 2016-2017 study with the same approach and database.

Design, Setting, and Participants

- A retrospective cross-sectional study of MarketScan Multi-State Medicaid data
- 248,665 continuously enrolled Medicaid beneficiaries without cancer with any of the 24 common surgical procedures performed
- Study period:October 2020 September 2021

Main Outcomes

For each procedure, we measured:

- opioid dispensing rate after the surgical procedure
- days' supply of the opioid prescription
- morphine milligram equivalent (MME) daily dose dispensed

We then presented the descriptive statistics of these measures in 2020-2021 and compared them with those in 2016-2017.

Conclusions

- Among Medicaid beneficiaries, the postoperative opioid dispensing rates, days' supply, and daily dosage in 2020-2021 decreased for most surgical procedures compared to 2016-2017.
- The decreases potentially reflect the implementations of evidence-based clinical guidelines on postoperative prescribing of opioids at the clinical settings.

Compared to 2016-2017, in 2020-2021,

- postoperative dispensing rates decreased in 19 out of 24 surgical procedures;
- 14 procedures had mean days' supply dispensed equal or less than 5 days;
- all procedures but excisional biopsy had decreased mean MME daily doses.

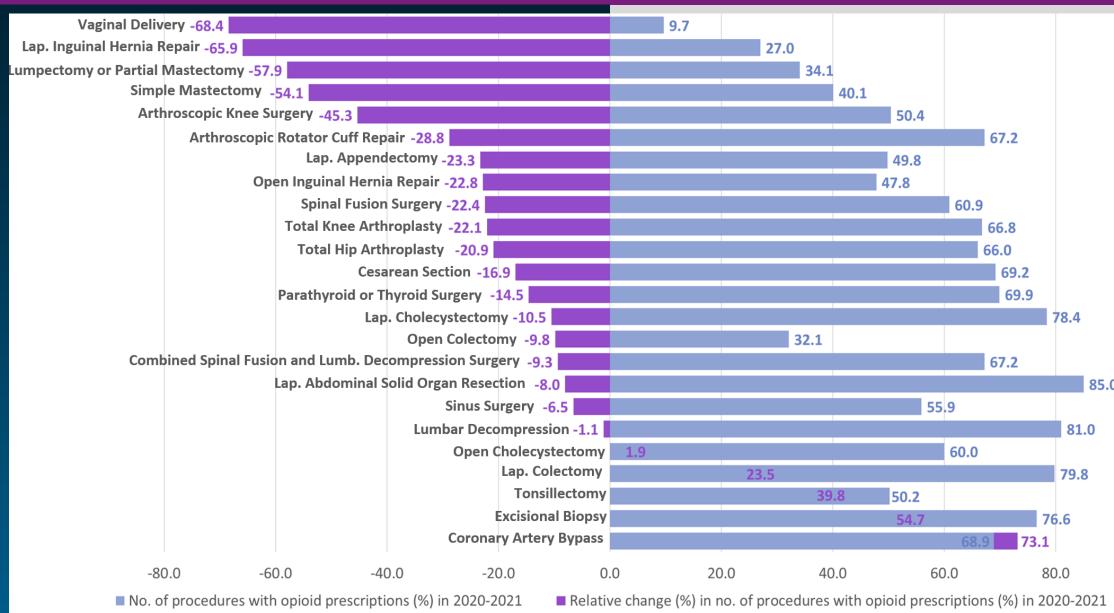


Figure 1. Number of procedures with opioid prescriptions (%) and their relative changes in 2020-2021 compared to 2016-2017

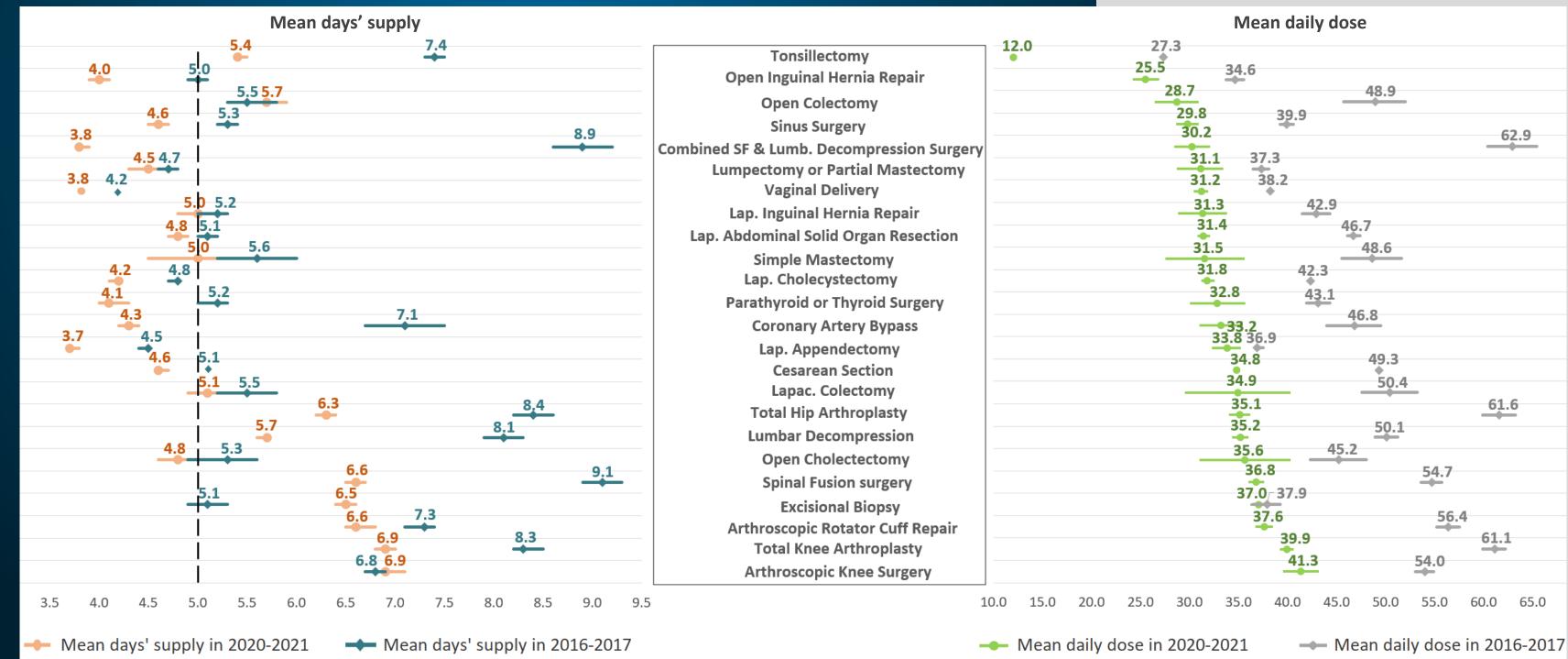


Figure 2. Mean days' supply of opioid prescriptions in 2020-2021 and 2016-2017 by surgical procedure (left);

Mean morphine milligram equivalent (MME) daily dose received in 2020-2021 and 2016-2017 by surgical procedure (right)

*SF: Spinal Fusion; lumb: lumbar; Lap: laparoscopic

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