

Opioid Disposal Patterns in Postoperative Adult Spine Patients: Are We Over Prescribing

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Introduction

The nation’s addiction to opioid drugs claimed more than 33,000 lives in 2015 and more than half involved prescription drugs. Opiate addiction is a concern for surgical patients, especially the spine population. In this study, we sought to describe patient disposal patterns following common spine surgical procedures.

Methods

Following IRB approval, 140 patients who underwent spine surgery from April through July 2017 were approached to complete a telephone survey. Sixty patients consented to participate and completed our survey.

Results

Twenty-six percent of patients were discharged on two opioid medications. Only 42% of patients reported use of all or nearly all of their prescribed opioid medication and 11% reported not filling the prescription at all. Of those who did not use all of their prescription, 20% were prescribed two opioid medications. On average, patients used 30 fewer pills than they were prescribed. Overall, 25% reported seeking a refill and 50% reported seeking other treatment for pain, including additional pain medication, pain clinic, physical therapy, heat or ice packs, and exercise. Only 3 patients reported keeping their opioid medication in a locked cabinet, with the majority keeping it in the kitchen or bathroom cabinet. Fifty-four percent of patients with unused opioid medication kept them, with only 3 patients reported proper disposal of their leftover opioids. Others who disposed of their leftover opioids reported a variety of methods including; flushing them down the toilet, trashing them or giving them to a family member.

Conclusions

The study highlights that prescribed opioids following spine surgery exceed patients’ needs. Patient education about proper use, storage, and disposal of unused opioid prescription is warranted to prevent abuse and misuse. Further studies to determine the appropriate opioid amount for every patient are needed to improve prescription practices.

Learning Objectives

- What are the patient reported opioid use practices following spine surgery?
- Do opioid prescriptions following spine surgery exceed the patients' needs?
- Are patients disposing of their leftover opioid prescription properly?