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NALOXONE PRESCRIPTION FILL RATE IN CHRONIC OPIOID MANAGED PATIENTS

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Introduction

Several states, including Ohio, mandate co-prescription of naloxone (Narcan) for patients managed on chronic opioids to reduced unintentional overdose. Few studies have shown increased dispensing of naloxone initially following the legal mandates (1,2). However, since the typical expiration is ~24 months or less, it is important that patients are provided up to date prescriptions, and more importantly, fill the prescription. Although updated co-prescription of naloxone by the providers are commonly monitored, it is unclear how many patients fill the medication, particularly in patients that are managed long term. In other acute and chronic medications, prescription fill rates are variable, with patients showing inconsistent compliance (3). This project aims to collect patient reported data via a survey as well as use the prescription monitoring program (PMP) to collect patient fill rate in this population for the medication.

Materials and Methods

After IRB approval, a survey was conducted in established chronic pain patients managed on opioid medications. The survey and results were anonymous, without collection of any identifiable information. The survey collected age and sex. The survey included patient understanding for the naloxone, awareness of being prescribed, reason for not filling. The dispensing of the naloxone was reviewed for the surveyed patients in the state PMP system.

Results/Case Report

A total of 208 patients were surveyed. 108 Females (51.9%), 100 Males (48.1%). Average age was 62.9, 63.4 years for males, 62.7 years for females. 204 (98%) stated that they had been prescribed naloxone. All 208 (100%) stated they knew what the naloxone was for, and 138 (66%) stated they had filled the medication. However, only 29 (13.9%) were confirmed to have filled the naloxone on PMP validation. Of those that stated they did not fill the prescription, 8 (11.4%) states the cost as the reason, 48 (68%) did not need it and, 8 (11%) did want to fill the prescription.

Discussion

Despite initial studies showing increased dispensing initially after legal mandates for co-prescription of naloxone with opioid prescriptions, the compliance may decrease with time or may have less impact than initially reported.

References

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Disclosures

No

Tables / Images