



New Research Reveals Potency and Quantity of Opioids Prescribed for Postsurgical Pain Poses Danger to Patients, their Families and Friends

October 11, 2018

Patients prescribed nearly 100 to 200 opioid pills to help manage pain from four common procedures

Persistent opioid use spikes among millennial women; Nearly one-in-five millennials report becoming addicted to or dependent on opioids following surgery

PARSIPPANY, N.J., Oct. 11, 2018 (GLOBE NEWSWIRE) -- Despite ongoing efforts to end America's opioid crisis, patients continue to receive large quantities of opioids for postsurgical pain. New research shows that patients received nearly 100 to 200 opioid pills to help manage pain from four common procedures ranging from rotator cuff repair and hip replacement to knee replacement and sleeve gastrectomy. Further, one-quarter of orthopedic surgery patients were prescribed a daily dose of opioids equal to 90 milligrams of morphine or more – doses so potent that the Centers for Disease Control and Prevention (CDC) says they put patients at high risk for overdose. The research also reveals that nearly two-thirds of surgeons frequently feel pressure to prescribe more opioids than they think necessary to treat postsurgical pain.

These findings come from a new report, *Exposing a Silent Gateway to Persistent Opioid Use – A Choices Matter Status Report*, based on an analysis of 2017 adjudicated medical and pharmacy claims data conducted by IQVIA Institute for Human Data Science and a nationwide survey of surgical patients and surgeons fielded in 2018 by Wakefield Research.

The report shows that across the seven orthopedic and soft tissue surgical procedures examined, patients were prescribed an average of 82 opioid pills each to help manage postsurgical pain. Close to nine percent of surgical patients became newly persistent users in 2017, continuing to take these opioids at least three to six months after their procedure. Among patients having knee replacement surgery or a colectomy, newly persistent opioid users climbed as high as 15 percent and 17 percent, respectively. Further, women were 40 percent more likely to become persistent opioid users than men; and among persistent users, females were prescribed 15 percent more opioids than their male counterparts.

Especially Concerning Trends Were Seen Among Millennials

While there was some decline overall in persistent opioid use from 2016 to 2017, the number of millennial women (ages 18-34) who became persistent users rose 17 percent over that year. Additionally, an alarming 18 percent of millennials surveyed reported they became addicted to or dependent on opioids following surgery. According to the CDC, overdose deaths among millennials increased almost 50 percent between 2014 and 2016.

"There is always a risk when exposing patients to opioids, so it's incumbent on surgeons to be extremely cautious and minimize the use of these medications whenever possible," said Paul Sethi, M.D., orthopedic surgeon at Orthopaedic & Neurosurgery Specialists (ONS) and President of the ONS Foundation for Clinical Research and Education. "While there are effective non-opioid options that should be incorporated in the treatment of surgery patients, this report shows that not enough progress is being made in reducing opioid prescribing, even though we know that most opioid addictions start with a prescription."

Overprescribing of opioids not only puts patients at risk of persistent use, addiction or dependence, but also results in unused pills available for potential misuse or abuse by others. According to the report:

- Nearly one-in-five surgical patients who refilled an opioid prescription admitted they did so even though they no longer needed the drug to manage their pain.
- The vast majority of survey respondents (nearly 90 percent) with leftover pills reported they did not dispose of them properly, with many keeping them in their homes and, in some cases, sharing them with family and friends.
- Almost half of 40 to 54 year-old patients with leftover opioids kept the pills in their home – an age range typical of parents of teenage children who are at high risk for diversion and misuse.

"Opioids are ravaging communities across the country, with more Americans now dying of overdoses than car crashes – and most of those individuals began by using prescription opioids," said Fred Muench, President and CEO of Partnership for Drug-Free Kids, a non-profit organization that is committed to helping families that are affected by substance use and addiction. "It's critically important for all patients – and especially parents and caregivers – to safely dispose of unused opioids to prevent them from falling into the wrong hands. An even more impactful solution would be for clinicians to discuss alternatives, including non-opioid options, with their patients to develop individualized approaches that reduce the need for high volumes of opioids after injuries and surgery, to help limit the availability of leftover pills in our households and communities."

The report also examined the annual total number of opioids prescribed nationwide for all clinical reasons, not just surgery, and found that enough opioids were dispensed in 2017 for every American to have 32 pills each, an 11 percent decline from 2016. While fewer pills were dispensed, patients in Tennessee, Oklahoma and Delaware were exposed to extremely high daily doses of opioids based on morphine milligram equivalency, putting them at greater risk of addiction and overdose.

Study Details

The IQVIA Institute analysis examined national and state-by-state opioid trends in 2017, as well as opioid use in the surgical setting in the months prior to and following surgery. The study analyzed the use of opioids for seven specific surgical procedures including colectomy (removal of a portion of the colon), hernia, hysterectomy, rotator cuff surgery, sleeve gastrectomy (a procedure for weight loss), total hip replacement and total knee replacement.

When comparing female and male opioid use, only gender-neutral surgeries were included in the analysis (six of the seven procedures).

To better understand the behaviors and attitudes related to postsurgical opioid use, Wakefield Research conducted a survey of 500 U.S. adults who had orthopedic or soft tissue surgery within 12 months prior to the survey period and 200 U.S. orthopedic or soft tissue surgeons. The survey was fielded between August 9th and August 16th, 2018, using an online poll.

IQVIA and Wakefield Research conducted the research independently with funding from Pacira Pharmaceuticals, Inc.

This report is part of an ongoing research initiative by Pacira Pharmaceuticals to help better educate patients about postsurgical opioid risks and available non-opioid options. For more information and to download *Exposing a Silent Gateway to Persistent Opioid Use – A Choices Matter Status Report*, visit www.PlanAgainstPain.com.

About Pacira

Pacira Pharmaceuticals, Inc. (NASDAQ:PCRX) is a specialty pharmaceutical company dedicated to advancing and improving postsurgical outcomes for acute care practitioners and their patients. The company's flagship product, EXPAREL[®] (bupivacaine liposome injectable suspension) was commercially launched in the United States in April 2012. EXPAREL utilizes DepoFoam[®], a unique and proprietary product delivery technology that encapsulates drugs without altering their molecular structure, and releases them over a desired period of time. To learn more about Pacira, including the corporate mission to reduce overreliance on opioids, visit www.pacira.com.

About Partnership for Drug-Free Kids

Partnership for Drug-Free Kids is committed to helping families struggling with their son's or daughter's substance use. We empower families with information, support and guidance to get the help their loved one needs and deserves. On our website, drugfree.org, by phone at 855-DRUGFREE, through text messaging and Facebook Messenger, the Partnership's Parent Helpline provides families with support and guidance to help them address substance use among adolescents and young adults. Finally, we build healthy communities, advocating for greater understanding and more effective programs to treat the disease of addiction. As a national nonprofit, we depend on donations from individuals, corporations, foundations and the public sector, and are thankful to SAG-AFTRA and the advertising and media industries for their ongoing generosity. We are proud to receive a Four-Star rating from Charity Navigator, America's largest and most-utilized independent evaluator of charities, as well as a National Accredited Charity Seal from The Better Business Bureau's Wise Giving Alliance.

Company Contact:

Pacira Pharmaceuticals, Inc.
Amber Sears, (973) 254-3587
Amber.Sears@pacira.com

Media Contact:

Coyne Public Relations
Alyssa Schneider, (973) 588-2270
aschneider@coynepr.com



Pacira Pharmaceuticals, Inc.