



American College of Surgeons Launches Education Program on Opioids and Surgery: Use, Abuse, and Alternatives

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Pacira grant will allow for the development and distribution of resources to educate patients and surgeons on opioid use in surgical care

CHICAGO, Nov. 22, 2016 (GLOBE NEWSWIRE) -- The American College of Surgeons (ACS) today announced a new multifaceted initiative to improve the knowledge and management of pain in surgical patients with a focus on opioid risk and non-opioid alternatives.

With an educational grant from Pacira Pharmaceuticals, Inc. (Pacira), ACS will develop *Opioids and Surgery: Use, Abuse and Alternatives* (Opioids and Surgery) professional and patient education materials. Evidence-based education for the surgical patient will support informed choice and meet the guidelines for health literacy, informed consent, and surgical patient safety. Surgeons and surgical practitioners will have access to a comprehensive library of resources specific to opioids and the surgical patient including managing pain expectations, non-opioid options and screening programs. Team training focused on pain management, discharge and transition management will be a critical component of the program.

In 2014, more people died from drug overdoses than in any year on record. The majority of drug overdose deaths (more than six out of ten) involve an opioid, according to the Centers for Disease Control and Prevention (CDC). The CDC also reports that since 1999 the number of overdose deaths involving opioids, including prescription opioid pain relievers and heroin, nearly quadrupled¹.

Opioids remain the mainstay of surgical pain management within the United States, with 110 million operations performed each year in which patients are prescribed opioids for perioperative pain. Within that group, 1 in 15 individuals will become a long-term user². In addition to the risks of long-term use, recent studies also show opioid related adverse drug events occur in 11 percent of patients with significant risk factors including cardiac arrhythmias, chronic obstructive pulmonary disease, prior opioid use, diverticulitis, and ulcerative colitis. Patients with multiple risk factors and an opioid related adverse event were more likely to experience higher overall health care costs, prolonged length of hospital stay and higher 30-day hospital readmission rates³.

ACS has identified a critical gap in knowledge, practice and communications about surgical perioperative pain management, specifically a lack of education and resources aimed at the use of opioids in individuals undergoing surgery. Annually, there are 25 million inpatient and 35 million outpatient surgical procedures performed in the United States. While opioids are the first line of choice for providing analgesia postoperatively, such use is often accompanied by adverse drug events including mortality.

"The surgical community has a unique opportunity to highlight the impact of the consequences of opioid use and to create resources for use by surgical professionals and patients. There is an increased national awareness of opioid use and addiction and resources have been developed for professional training. However, specific education is not readily available for patients and their families, and new resources are needed for surgical professionals in their care of patients," said ACS Division of Education's Founding Director Ajit K. Sachdeva, MD, FACS, FRCS.

The Opioids and Surgery program will support comprehensive training for surgical professionals, including identification of high-risk patients, management of opioid-addicted patients, non-opioid options, and discharge training and monitoring of patients. Also included is a patient education program to support informed choice and decision quality. This program will provide surgical professionals with evidence-based data that meets the guidelines for health literacy, informed consent and surgical safety, in a format that can be printed or emailed to the patient and included in their electronic health records. The resulting educational materials will be distributed nationally with the support of the Pacira educational grant.

"Pacira is proud to partner with the American College of Surgeons on the development of comprehensive clinician and patient education regarding the importance of reducing avoidable exposure to opioids, their side effects, and their long-term health risks. Research continues to elucidate a connection between postsurgical opioid prescribing and the potential for long-term use, addiction and dependence, so we are pleased to contribute to advancing the understanding and awareness of available non-opioid options, such as EXPAREL, and to ultimately improving patient care," said Dave Stack, CEO and Chairman of Pacira.

"This initiative provides us with an innovative opportunity to address a growing patient safety problem in the United States. The ACS mission is to provide optimal surgical patient care and with grant funding from Pacira, we can now provide additional resources for better management of perioperative pain. This program will build on the success of our diverse catalog of patient education and skills training resources," ACS Executive Director David B. Hoyt, MD, FACS, said.

ACS anticipates the Opioids and Surgery program will demonstrate the comparative benefit and reduction of harm with the use of a guided pain management program. The long-term goal is to develop a national standard for best intervention methods for pain control for both inpatient and outpatient procedures and through optimal communication and follow-up with the primary care provider. Adherence to guidelines and providing engaging visual methods to communicate care needed for recovery is an effective way to improve quality, reduce variation in care and improve financial performance.

¹ Opioid Painkiller Prescribing. Center for Disease Control and Prevention. Available at: <http://www.cdc.gov/vitalsigns/opioid-prescribing/>. Accessed October 28, 2016.

² Alam, A., Gomes, T., & Zheng, H. Long-term analgesic use after low-risk surgery: a retrospective cohort study. *Arch Intern Med.* 2012;172:425-430.

³ Minkowitz, H.S., Gruschus, S., & Raju, A. Adverse drug events among patients receiving post-surgical opioids in a large health system: risk factors

and outcomes. *Am J Health Syst Pharm.* 2014;71:1556-65.

About the American College of Surgeons

The American College of Surgeons is a scientific and educational organization of surgeons that was founded in 1913 to raise the standards of surgical practice and to improve the care of the surgical patient. The College is dedicated to the ethical and competent practice of surgery. Its achievements have significantly influenced the course of scientific surgery in America and have established it as an important advocate for all surgical patients. The College has more than 80,000 members and is the largest organization of surgeons in the world. The American College of Surgeons Foundation was established in 2005 to provide philanthropic support for the research, education, and patient safety programs of the American College of Surgeons.

About Pacira

Pacira Pharmaceuticals, Inc. (NASDAQ:PCRX) is a specialty pharmaceutical company focused on the clinical and commercial development of new products that meet the needs of acute care practitioners and their patients. The company's flagship product, EXPAREL® (bupivacaine liposome injectable suspension), indicated for single-dose infiltration into the surgical site to produce postsurgical analgesia, was commercially launched in the United States in April 2012. EXPAREL and two other products have successfully utilized 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. Additional information about Pacira is available at www.pacira.com.

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