

Persistent, prolonged opioid use occurs after plastic surgery

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did not fill opioid prescriptions, those who filled [prescriptions](#) in the perioperative period were significantly more likely to exhibit persistent and prolonged opioid use (odds ratios, 2.87 and 2.90, respectively), with the greatest odds for persistent use in [patients](#) undergoing breast and nasal procedures (odds ratios, 4.36 and 3.51). Perioperative opioid use, procedure type, and previous year [mental health](#) and substance abuse diagnosis were independent risk factors for persistent and prolonged opioid use.

"Given the significant risk of persistent opioid use after plastic and reconstructive procedures, it is imperative to develop best practices guidelines for postoperative opioid prescription practices in this population," the authors write.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

(HealthDay)—Persistent and prolonged opioid use occur after plastic and reconstructive surgical procedures, according to a study published online March 7 in *JAMA Facial Plastic Surgery*.

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Cristen Olds, M.D., from the Stanford Hospital and Clinics in California, and colleagues conducted a population-based cohort study involving 466,677 patients who underwent five classes of plastic and reconstructive procedures between Jan. 1, 2007, and Dec. 31, 2015. The prevalence of immediate and long-term postoperative [opioid use](#) was examined.

The researchers found that 54.6 percent of the patients filled prescriptions for postoperative analgesics; opioids accounted for 91.5 percent of the analgesic prescriptions filled. In 6.6 and 2.3 percent of patients, persistent ([opioid prescriptions](#) filled 90 to 180 days postoperatively) and prolonged (opioid prescriptions filled 90 to 180 days and again 181 to 365 days postoperatively) opioid use occurred. Compared with patients who

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