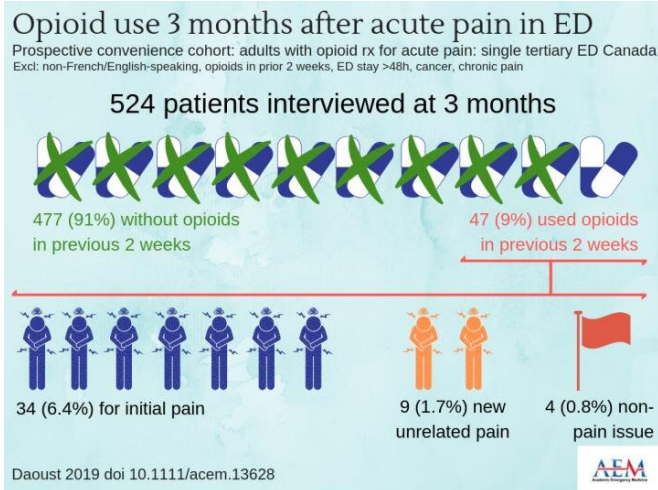


# Opioid use and misuse three months after ED visit for acute pain

August 7 2019



Prospective convenience cohort study of adults with opioid prescription for acute pain conducted in the emergency department of a tertiary care urban center, Canada. Credit: Kirsty Challen, B.Sc., MBChB, MRes, Ph.D., Lancashire Teaching Hospitals, United Kingdom

Opioid use at the three-month follow-up in emergency department patients discharged with an opioid prescription for acute pain is relatively low and not necessarily synonymous with opioid misuse. That is the conclusion of a study to be published in the August 2019 issue of *Academic Emergency Medicine (AEM)*, a journal of the Society for Academic Emergency Medicine (SAEM).

The lead author of the study is Raoul Daoust MD, MSc, a clinical professor and researcher in the Department of Family Medicine and Emergency Medicine at the University of Montreal.

Daoust, et al., found that "...9% of patients discharged from the ED with an [acute pain](#) condition still consumed opioids 3 months later and 91% of them did so to manage pain (72% initial

pain, 19% new pain). Furthermore, of the whole cohort, less than 1% consumed opioids for other reasons than pain, suggesting misuse."

"The clear and present applied implication for research from Daoust et al is the need to test non-narcotic methods to treat acute pain. The more theoretical research implication is the need to better understand the neurobiology that drives the conversion of acute to chronic [pain](#)," commented Jeffrey A. Kline, AEM Editor-in-Chief, in a summary about the paper sent to SAEM members.

The findings are controversial and provocative, as suggested by the following analysis from Gail D'Onofrio, MD, MS, professor of emergency medicine and chair in the department of [emergency medicine](#) at Yale University:

"Emergency physicians should not be reassured by the authors' findings. The lack of a denominator, poor response rate (56%), and applied definition of misuse are significant limitations. Shah et al (MMWR 2017) demonstrated the escalating probability of continued [opioid use](#) among opioid-naïve patients at one and three year if greater than three days were prescribed."

Dr. D'Onofrio is internationally known for her work in alcohol and other [substance use disorders](#) (SUDs). For the past 25+ years she has developed and tested interventions for alcohol, opioids, and other substance use disorders, serving as principal investigator on several large National Institutes of Health, Substance Abuse and Mental Health Services Administration, and Centers for Disease Control and Prevention studies. She is a founding board member of the Board of Addiction Medicine, recently recognized by the American Board of Specialties as a specialty, sub-specialty.

**More information:** Raoul Daoust et al, Opioid Use and Misuse Three Months After Emergency Department Visit for Acute Pain, *Academic*

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