

Study shows opioid, sedative and antidepressant use pre-surgery leads to worse outcomes

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Dr. Avinash Bhakta, colorectal cancer surgeon with the UK Markey Cancer Center and lead author on the study. Credit: University of Kentucky

A study led by University of Kentucky Markey Cancer Center

researchers showed that patients who already used opioids, sedatives or antidepressants prior to colorectal surgery experience significantly more complications post-surgery.

Published in *Diseases of the Colon & Rectum*, the study examined 1,201 [patients](#) 18 years of age and older who underwent colorectal resection for any indication other than trauma at UK HealthCare. Of these patients, roughly 30% used opioids, 28% used antidepressants and 18% used sedatives, all legally prescribed by a doctor pre-operatively.

Patients on any of these medications showed an increase in several common complications post-surgery, including infections, prolonged intubation, longer length of stay, readmissions, respiratory failure and even mortality. These problems were particularly pronounced in patients who regularly used opioids prior to surgery.

The preoperative use of opioids, sedatives and antidepressants is on the rise in the U.S. Though the current opioid crisis has raised awareness for limiting [opioid use](#), many patients still receive opioids for [pain management](#), and finding the right balance of medication is an ongoing issue for many patients and doctors. Patients with [anxiety disorders](#) or other [mental health issues](#) often receive sedatives or antidepressants.

However, risk prediction models for postoperative complications do not take these common medications into consideration, says Dr. Avinash Bhakta colorectal surgeon at the UK Markey Cancer Center and lead author on the study. To reduce complications post-surgery, he says more needs to be done to help patients reduce their need for these drugs in managing pain and anxiety prior to any [major surgery](#).

"Most colorectal resections are elective in nature, so we want to focus on the use of opioids and sedatives and counsel patients on the need to decrease the use of these drugs before surgery," Bhakta said. "These

drugs are necessary for many patients, but if we can decrease how much they're using, we can help decrease long-term complications. Not only do we want to improve their surgical outcomes, we want to improve their overall health."

More information: Tong Gan et al. A Retrospective Review: Patient-Reported Preoperative Prescription Opioid, Sedative, or Antidepressant Use Is Associated with Worse Outcomes in Colorectal Surgery, *Diseases of the Colon & Rectum* (2020). [DOI: 10.1097/dcr.0000000000001655](https://doi.org/10.1097/dcr.0000000000001655)

Provided by University of Kentucky

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