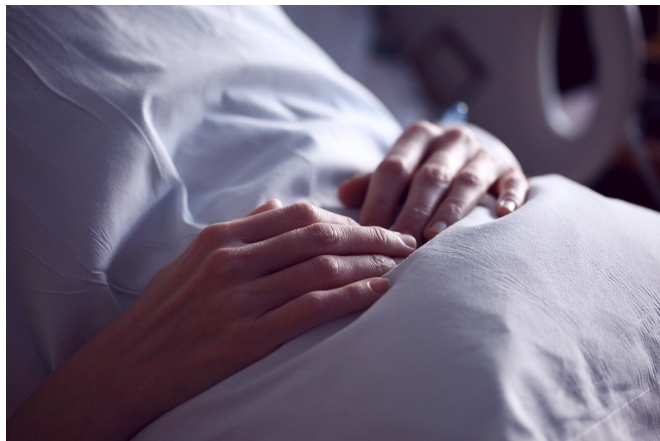


Patient support program for painful conditions may reduce opioid use

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A program that provides ongoing support to patients with painful conditions and complex medication regimens may also help them avoid using potentially risky opioid pain medications, or reduce the amount they use, a new study finds.

The study looked at people with a wide range of [autoimmune disorders](#), including arthritis and psoriasis, who were taking an injected biologic [medication](#) to treat their symptoms and prevent painful flare-ups. Such treatment involves frequent self-injections on a strict schedule, special disposal of used supplies and often high out-of-pocket costs—which is why [drug companies](#) have started patient support programs to keep [patients](#) on track and even reduce their costs.

Using anonymous data from autoimmune disorder patients with private non-Medicare insurance, the researchers looked at treatment adherence and opioid prescription fills for nearly 2,000 new biologic patients who took part in a PSP at least for a short time, and 728 who did not. None had received an opioid in the three months before they started on the biologic, and most were women in

their 50s.

In addition to being much more likely to stick to their medication regimen, and stay on it longer, the patients in the PSP were 13% less likely to start taking opioid pain medications, and 26% less likely to fill two or more opioid prescriptions, than the others. Even so, 38% of the patients in the support program filled at least one opioid prescription, and 19% filled two or more. Opioids carry a risk of long-term dependence, as well as risky interactions with other medications and alcohol.

Among all patients who did fill at least one opioid prescription, those in a PSP were less likely to use them for an extended time. The differences persisted even after the researchers took into account income and checked for past cancer diagnosis; cancer-related pain is a CDC-recommended use for [opioid](#) pain medication, while autoimmune disorders are not.

When the researchers zeroed in on patients with specific types of conditions, the strongest evidence of difference between the PSP participants and non-participants was among the group that took the biologic for a digestive system autoimmune disorder such as ulcerative colitis or Crohn's disease.

"This research demonstrates that the addition of a multi-faceted patient support program along with specialty medication led to better patient-centered outcomes when compared to the [use of medication](#) alone," says first author Mark Fendrick, M.D., professor of internal medicine at the University of Michigan and director of the Center for Value Based Insurance Design. "As more and more Americans are prescribed complicated medication regimens, the availability of additional resources is likely to lead to higher rates of medication adherence, and healthier, more satisfied patients."

More information: A. Mark Fendrick et al, Higher

Medication Adherence and Lower Opioid Use
Among Individuals with Autoimmune Disease
Enrolled in an Adalimumab Patient Support
Program in the United States, *Rheumatology and
Therapy* (2021). DOI: [10.1007/s40744-021-00309-9](https://doi.org/10.1007/s40744-021-00309-9)

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