Prescription Opioid Use Disorder in patients prescribed opioids for chronic pain: a diagnostic challenge for Australian General Practitioners

HESTER HK WILSON, 1, 2, 5 BEN HARRIS ROXAS, 2 NICHOLAS LINTZERIS, 1, 3, 4 MARK F

HARRIS⁵

¹ Drug and Alcohol Services, South East Sydney Local Health District, ² School of Population Health, University of New South Wales, ³ Department Addiction Medicine, University of Sydney,

⁴ NSW Drug and Alcohol Clinical Research and Improvement Network (DACRIN), NSW Health,

⁵ Centre for Primary Health Care and Equity (CPHCE), University of New South Wales

Presenter's email:drhesterwilson@seelifechange.com

Issues

Chronic pain (CP) affects 20% of people in Australia. Prescription opioids are commonly used long term to treat this. Some patients develop prescription Opioid Use Disorder (pOUD) due to this prescribing. Clinical presentation of CP and pOUD comorbidity can be complex and pOUD may be underdiagnosed in this patient group. Untreated pOUD can lead to significant morbidity and mortality and patients who could benefit from pOUD management may be missing out on evidence-based treatment. The experience of General Practitioners (GPs) in NSW, Australia diagnosing pOUD in their patients prescribed opioids for CP is not well understood.

Approach

Semi structured interviews with 24 GPs working in general practice in NSW, Australia, explored the diagnostic complexity of pOUD in patients prescribed opioids for CP.

Key findings

The participants found it difficult to diagnose pOUD in their patients prescribed opioids for CP. Some participants were able to describe the components of this disorder with difficulty and described feeling overwhelmed and unsure. Others understood that prescription opioids have risk, were concerned about this risk, but had little understanding of the diagnostic criteria for pOUD. Three GPs who had undertaken further training in the management of opioid use disorder had good understanding of the diagnosis.

Implications for Practice

Treatment for pOUD is unlikely occur without accurate diagnosis. GPs need to understand and be able to easily use the diagnostic criteria for pOUD in their patients prescribed opioids for chronic pain to allow early diagnosis and access to treatment. The complexities of this diagnosis in patients prescribed opioids for CP the Australian general practice setting are discussed.

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