

Do General Opioid Prescription Guidelines Affect Oncologists' Prescribing Patterns?

[Pain Medicine News](#)

Guidelines aimed at reducing opioid prescriptions among all U.S. physicians led to a decrease in prescribing patterns among oncologists, according to data presented at the 2023 National Comprehensive Cancer Network conference, held in Orlando, Fla.

The study also demonstrated that oncologists' gender, age and location affected their opioid prescribing patterns ([J Natl Compr Canc Netw 2023;21\[3.5\]:BPI23-007](#)).

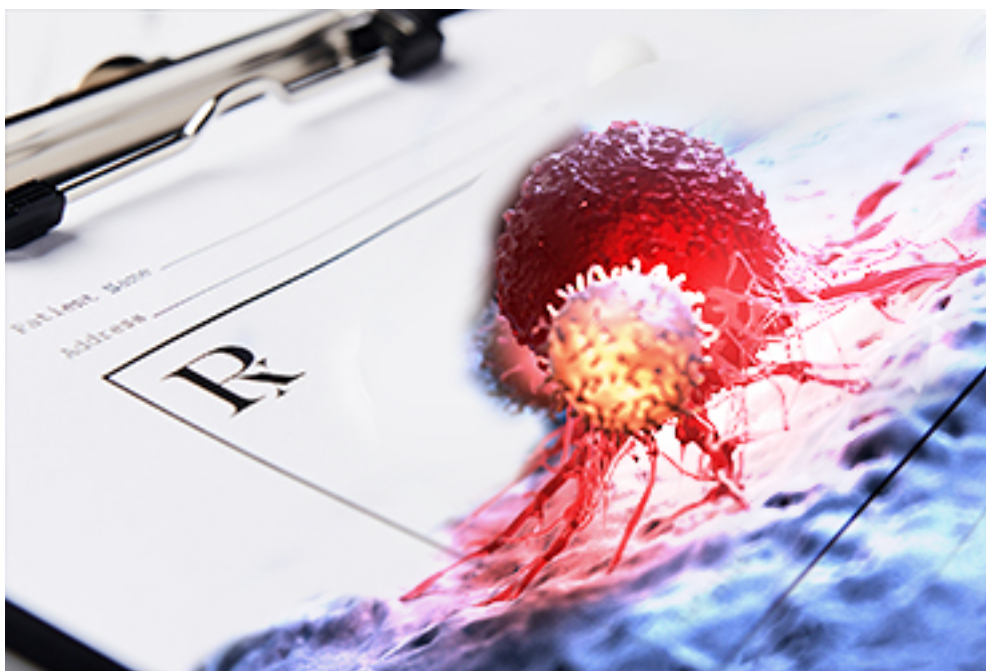
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"There was a significant decrease in opioid prescriptions from medical oncologists starting in 2017, which coincided with the recognition of the opioid crisis as a national public health emergency and the publication of U.S. Centers for Disease Control and Prevention guidelines for opiate prescribing in noncancer settings," study researcher Joshua Kra, MD, an assistant professor of medicine and oncologist

at the Rutgers Cancer Institute of New Jersey, in New Brunswick. "This would suggest these factors contributed to how oncologists changed their management of opioid prescriptions for cancer patients."

In the retrospective study, researchers culled data from the Centers for Medicare & Medicaid Services (CMS) Medicare Part D Prescribers - by Provider and Drug and CMS Medicare physician national downloadable files dating from 2013 to 2019. The data included physicians' genders, years of practice, regions and practice settings.

The researchers identified significant differences in demographics and mean opioid prescribing between years using Pearson's chi-squared and analysis of variance tests with post hoc Tukey test analyses. Significant predictors of total opioid and total long-acting opioid prescriptions were identified by multivariate binary logistic regression.



From the total of 116,079 medical oncologists included, the researchers found there was no significant difference in mean total opioid prescriptions among oncologists from 2013 to 2016. Yet, total opioid prescriptions decreased among oncologists “significantly” from 2016 to 2017 ($P<0.05$), as well the period from 2018 to 2019 ($P<0.01$).

Greater total opioid prescriptions were associated with male practitioners ($P<0.001$), those who have been in practice for over 10 years ($P<0.001$) and physicians located outside urban areas ($P<0.001$). Total opioid prescriptions were greatest in the South and Midwest ($P<0.001$).

The researchers noted the same trends were observed with total long-acting opioid prescriptions, except a significant decrease from 2017 to 2018 ($P<0.05$).

“While we are able to show a statistical connection between opioid prescribing changes from 2013 to 2016 versus 2017 to 2019, we cannot determine with certainty the exact cause of this finding (correlation vs. causation),” Kra concluded.

—*Myles Starr*

Kra reported no relevant financial disclosures.

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