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Background

In the past fifteen years, there has been a reported 370% increase in opioid overdose deaths, leading the U.S. to declare the opioid epidemic a public health emergency in 2017¹

To improve monitoring of patients with opioid prescriptions, UConn Health implemented a chronic opioid therapy policy

Since implementation of this policy, the number of patients receiving chronic opioids from UConn providers has decreased, and the reason for this is unknown

Methods

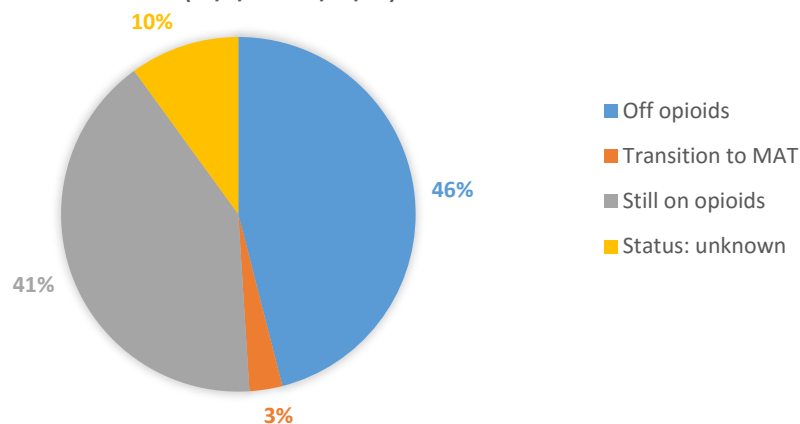
- Extracted data for all patients with “chronic” opioid prescriptions in the UConn Health system
- Eliminated patients currently on medication-assisted therapy (MAT), ie. suboxone
- Identified status of prescription for each patient
- Checked CT prescription monitoring program database to identify opioid prescriptions outside of UConn Health

Objectives

- Identify patient attrition
- Classify patient outcome by status of prescription and relationship with UConn
- Identify outcome of patients lost to follow-up

Results

OUTCOME OF CHRONIC OPIOID PRESCRIPTIONS FOLLOWING POLICY IMPLEMENTATION DATES
(11/5/18 – 11/12/19)



Patient Outcome	Cohorts				Total
	1	1&2	1, 2, 3	All	
Off opioids	94	15	12	7	128(46%)
Remained at UConn	58	8	9	7	82 (64%)
Lost to follow-up	36	7	3	0	46 (36%)
Transition to MAT	4	3	1	1	9(3%)
Still on opioids	50	19	8	35	112(41%)
UConn	16	2	3	33	54 (48%)
Outside prescriber	34	17	5	2	58 (52%)
Status: unknown	16	4	2	6	28(10%)
Total	164	41	23	49	277

Conclusions

- For the off opioids group –
 - **64% of patients continued to receive care at UConn, suggesting that providers are able to maintain a relationship with patients while discontinuing opioids**
 - 36% of patients were lost to follow-up
- For the status: unknown group, reasons for discontinuation included “left the practice”, “moved out of state”, “moved to a skilled nursing facility”, and “passed away”

Limitations

- Qualitative analysis based on chart review – relies heavily on accurate chart documentation
- Could not consistently determine the true outcome of the “lost to follow-up” group
- Unable to isolate patients who fully weaned off opioids due to resolution of pain vs. those who transitioned to non-opioid alternatives

Further Research

- How are UConn Health providers are maintaining a relationship with patients while discontinuing long-term opioid prescriptions ?
- Are patients transitioning from opioids to something else to manage pain?
- How do outside providers and primary care providers interact to manage mutual patients on chronic opioid therapy?