Exploring the Complex Interplay Between the Use of Pharmaceutical Opioids and Pain Management Among People Who Inject Drugs Regularly in Australia

Benjamin Phillips

Introduction

Since the heroin shortage the illicit Drugs Reporting System (IDRS) has noted an increase in the use and injection of morphine and oxycodone. Over the same period the age of people who inject drugs (PWID) has also increased. The Australian Needle Syringe Program (NSP) survey noted similar findings over the same period. We know from a number of Australian and international studies that PWID experience excess morbidity and mortality when compared to those in the general population.3-5 That prescribers are often reluctant to prescribe opioid analgesics to people with a history of injecting drug use.6-7 Currently there is no evidence in Australia on the prevalence of chronic pain among PWID and the use of pharmaceutical opioids (PO) for the legitimate therapeutic goals of pain management.

Aim

The aim of this poster is to examine pharmaceutical opioid use among a sample of PWID and to understand to what extent does this group experience pain.

Methodology

The IDRS is a national drug monitoring system that serves as a strategic warning system to identify emerging local and national trends. Face-to-face survey with people who inject drugs regularly are administered annually in every capital city across the country. To assess the severity of pain and the impact on pain on daily functions elements of the Brief Pain Inventory (BPI) were included in the 2011 IDRS survey. The BPI is a brief and widely validated tool for accessing pain in both clinical and research settings and uses a simple numeric scale with scores from 0-10. The preliminary screening question asks ‘Have you had pain other than everyday pain?’ defining everyday pain as toothache, sprains, and minor headaches. In 2011 there was a preliminary screening question asking ‘Have you had pain other than everyday pain?’ defining everyday pain as toothache, sprains, and minor headaches. In 2011, there was an increase in the use and injection of opioids. Over the same period the age of participants in the IDRS was 38 years old (range: 17-65), this continues to rise over time and follows similar trends noted in the Australian Needle Syringe Program (NSP) survey. We noted a significant difference in regard to their drug of choice being pharma opioids, their recent use of illicit pharma opioids and their recent use of over the counter (OTC) codeine.

Results

The mean age of participants in 2011 was 38 years old (range: 17-65), this continues to rise over time and follows similar trends noted in the Australian Needle Syringe Program (NSP) survey. We noted a significant difference in regard to their drug of choice being pharma opioids, their recent use of illicit pharma opioids and their recent use of over the counter (OTC) codeine.

Discussion

Preliminary findings have found significantly higher recent use of non-prescribed (illicit) pharmaceutical opioids & OTC codeine among those reporting ‘non-everyday pain’ and those scoring ≥ 5 on the BPI. This suggests that the motivations for use of illicit pharmaceutical opioids among this population may be more complex than a mere substitute for heroin. This population already experiences excess morbidity and mortality,8 as they continue to age both chronic non-cancer pain and chronic cancer pain are expected to increase. The challenge ahead is considering the harm caused by not providing pharmaceutical opioids when restricting access to reduce the harm of non-prescribed use.

Limitations & acknowledgements

These are only preliminary results and further investigation and analysis are required. Participants (n=868) were recruited via NSPs during business hours. This sample is not representative of all people who inject drugs regularly. This research would not have been possible without the people and service providers that provided their time, information and/or support, as well as funding from the Australian Government Department of Health and Ageing.