Will the FDA’s REMS for Opioids Become an Emerging Solution in Pain?

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Background
- Chronic pain affects more than 115 million American adults. [1]
- The most routine utilization risk assessment tool was opioid treatment agreements (26%), followed by urine drug testing (18%). Interestingly, almost 30,000 loyal pain clinic members of the program website (for whom there was an active email address), inviting them to participate in an 18-question online survey about issues related to their beliefs for prescribers and it may be only a matter of time before mandatory prescriber education on opioids tied to Drug Enforcement Administration (DEA) registration to provide controlled substances obtains congressional approval.
- The results of this survey sent to loyal members of the robust website (www.emergingsolutionsinpain.com/index.php?option=com_content&view=article&id=373&Itemid=1) for prescribers and it may be only a matter of time before mandatory prescriber education on opioids tied to Drug Enforcement Administration (DEA) registration to provide controlled substances obtains congressional approval.
- The most routine utilization risk assessment tool was opioid treatment agreements (26%), followed by urine drug testing (18%). Almost 30,000 loyal pain clinic members of the national economic burden associated with chronic pain is estimated to be greater than $560 billion per annum. [1]

Objectives
- With more than a million prescribers of controlled substances registered with the Drug Enforcement Administration (DEA) and about 4 million (44%) respondents who completed the survey, the FDA’s REMS for opioids will affect substantially more than 70% of people who abused prescription pain relievers accessed them through friends or relatives. [2]
- Education for the public and health care providers to increase awareness about the dangers of prescription opioid abuse, and ways to appropriately store, dispose, reconstitute controlled substances medications, and in the implementation of good practice risk management techniques.
- The key elements of REMS felt MOST necessary included the need for a nationwide prescription monitoring program with real-time data available to physicians and pharmacists at point of care (60%), and education initiatives for patients and other care team members (44%).
- Prescribing opioids that cause less than 3% correctly (88%), and that the FDA REMS can have an impact on problems of opioid misuse, abuse and overdose, while maintaining legitimate access for pain patients to these serious risks associated with improper use due to their longer elimination time from the body.

Results
- A total of 638 surveys were completed. Most respondents were either hospital (28.1%) or office-based (24.1%). The recent Institute of Medicine (IOM) report highlighted that many chronic pain patients receive inadequate treatment of their pain, and offers a blueprint for action in transforming prevention, care, education, and research with the goal of providing better relief for people with pain. [1]
- The survey was developed with question logic or skip logic to one or more answer choice, so not all completers needed to answer all 18 questions. All surveys were completed online and the survey results were not examined on an individual basis, instead all survey participants’ data was collected and analyzed in aggregate.

Method
- On June 21, 2011, MediCom Worldwide, Inc. sent an email invitation to almost 32,000 loyal pain clinic members of the Emerging Solutions in Pain (ESP) website (www.emergingsolutionsinpain.com/index.php?option=com_content&view=article&id=373&Itemid=1). The survey was sent to more than 115 million American adults. [1]
- The most routine utilization risk assessment tool was opioid treatment agreements (26%), followed by urine drug testing (18%). Interestingly, almost 30,000 loyal pain clinic members of the program website (www.emergingsolutionsinpain.com/index.php?option=com_content&view=article&id=373&Itemid=1) for prescribers and it may be only a matter of time before mandatory prescriber education on opioids tied to Drug Enforcement Administration (DEA) registration to provide controlled substances obtains congressional approval.
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Conclusion
- Two of the four White House National Action Plan goals are to:
  - Increase prescriber and public education on opioid risks, and
  - Expand access to prescription drug monitoring programs (PDMPs).
- It is currently unknown what sort of educational program will be developed for prescribers and it may be only a matter of time before mandatory prescriber education on opioids tied to Drug Enforcement Administration (DEA) registration to provide controlled substances obtains congressional approval.
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References