

Background

The COVID-19 pandemic has significantly affected many aspects of medical care, including access to opioids. Several recent studies have attempted to identify the effect of the pandemic on opioid prescriptions, with results varying based on location, clinical setting, and population.

The true impact of the pandemic on opioid prescribing patterns for patients with non-cancer chronic pain, specifically in primary care, is still unknown. The effect of racial/ethnic subgroups on these patterns is unknown, as well. There is an unmet need for a large, EMR-based study examining the impact of the COVID-19 pandemic on these prescribing patterns.

Methods

- ▶ This is a retrospective observational study utilizing electronic health record data from Data QUEST and UW's electronic data warehouse, capturing fifty-five primary care clinics across Washington and Idaho from 2018-2021.
- ▶ We extracted data from adults without cancer, with a chronic pain diagnosis, and receiving long-term opioid therapy, and explored differences in opioid prescribing by race/ethnicity.

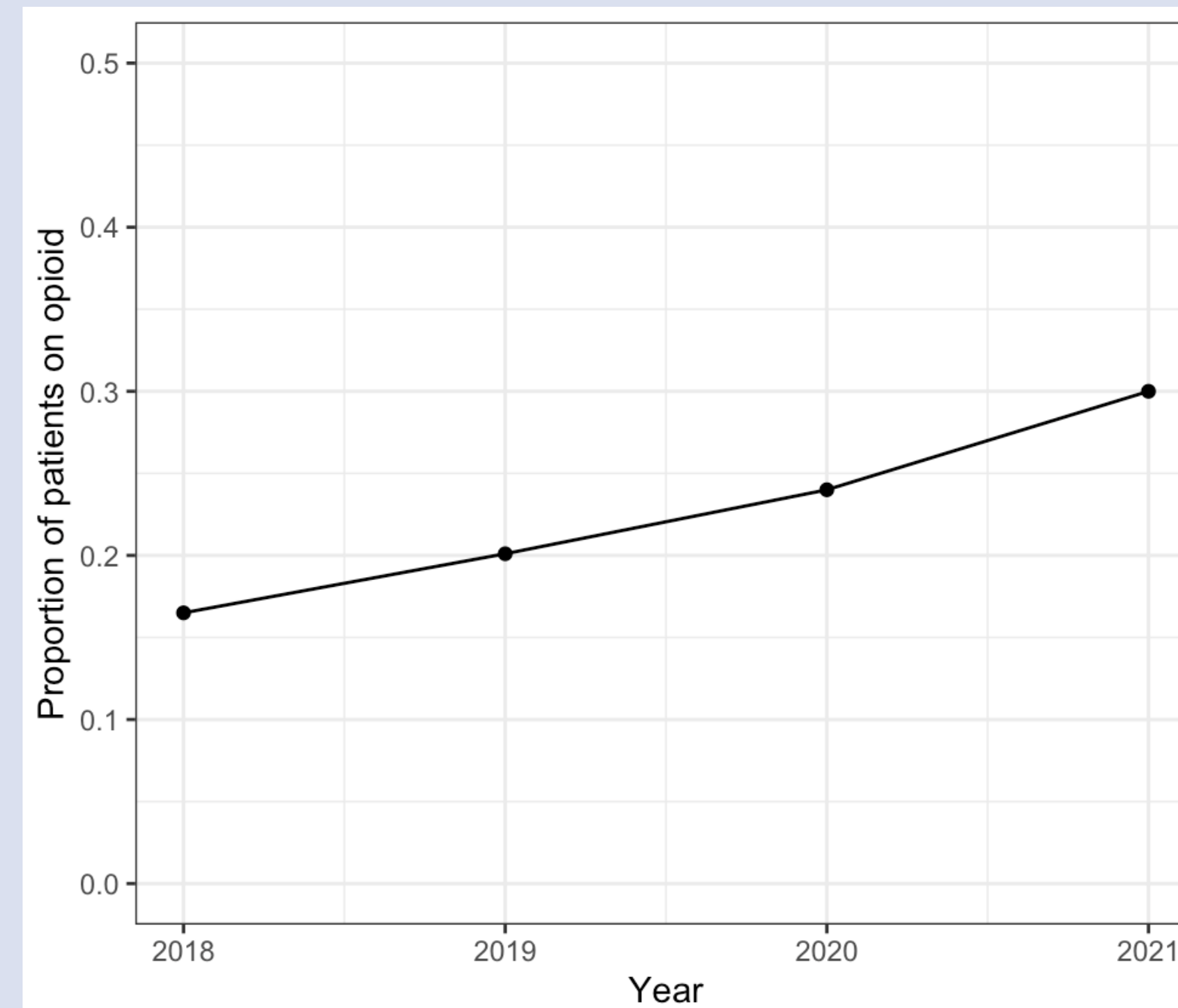
Acknowledgements

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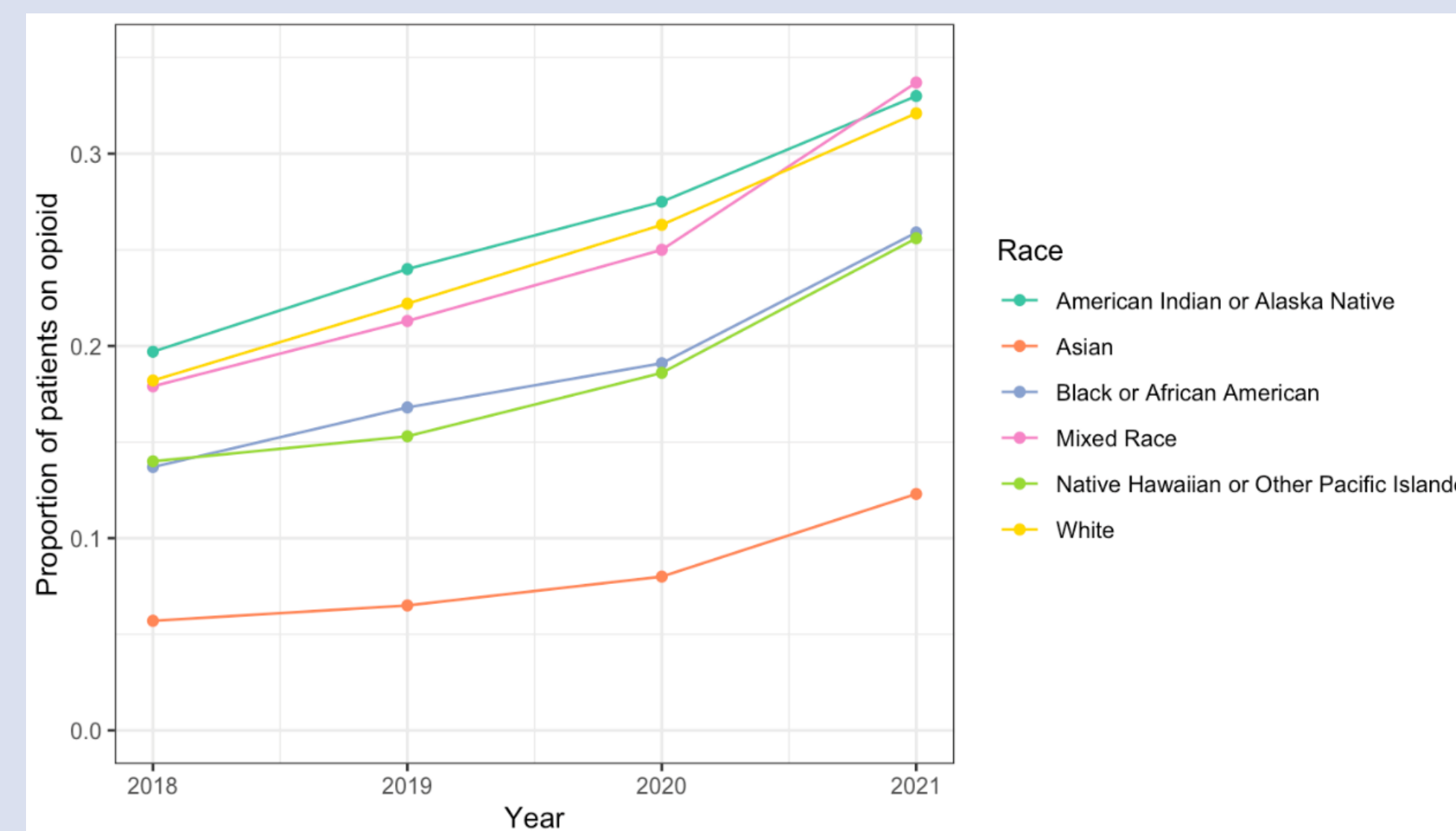
Institute of Translational Health Sciences - UL1 TR002319

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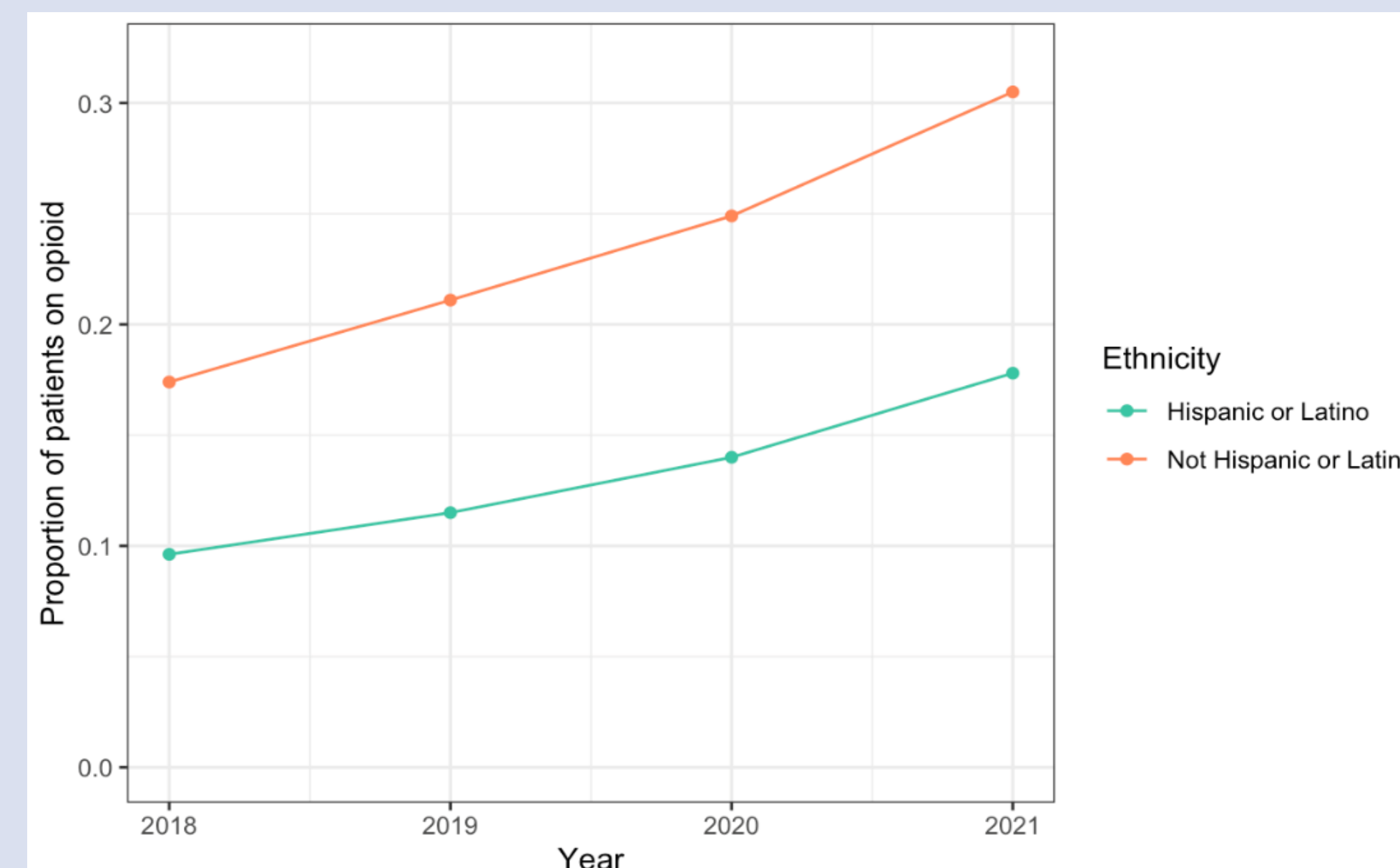
Results



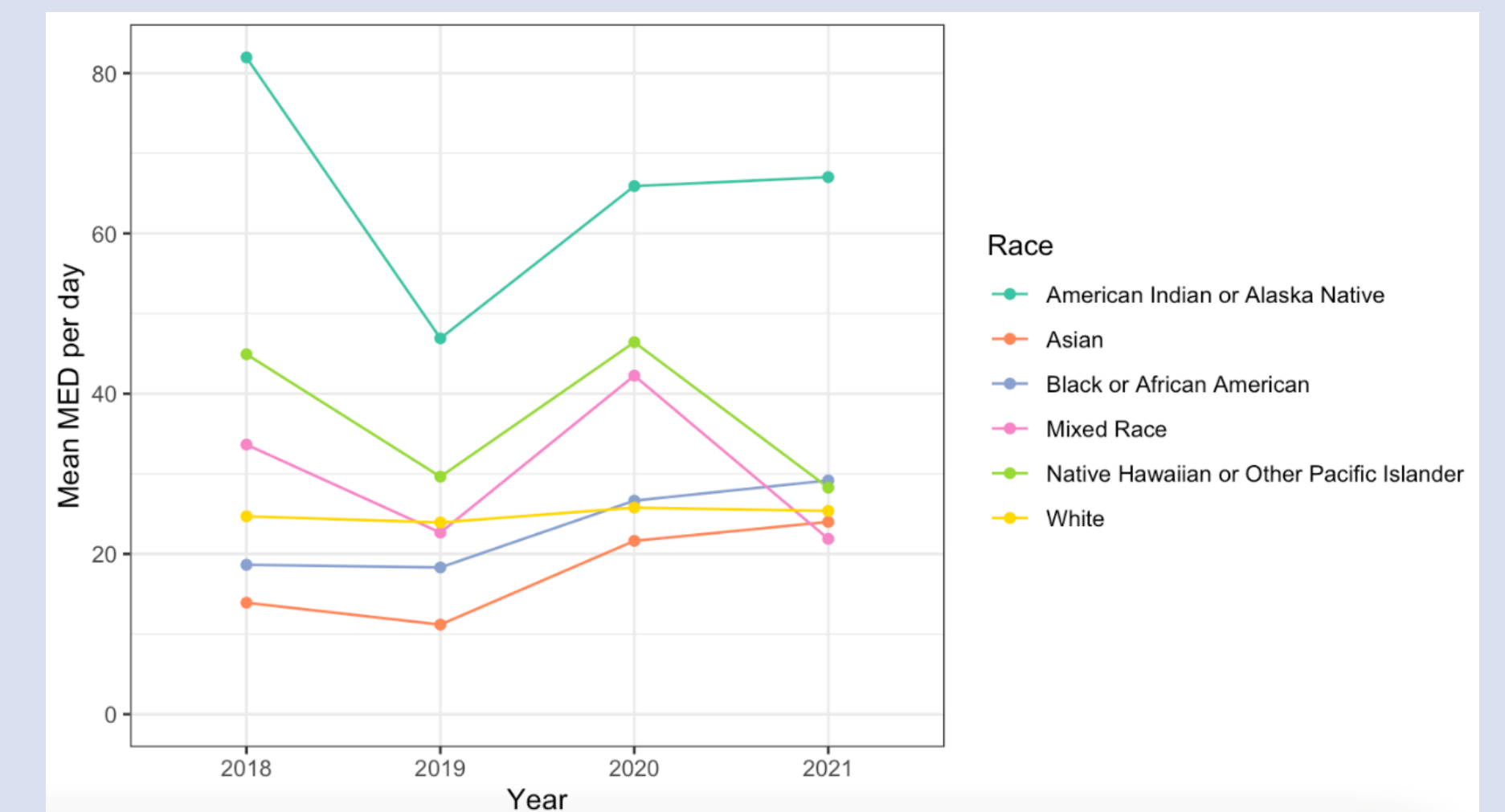
Proportion of patients with chronic pain receiving opioids over time



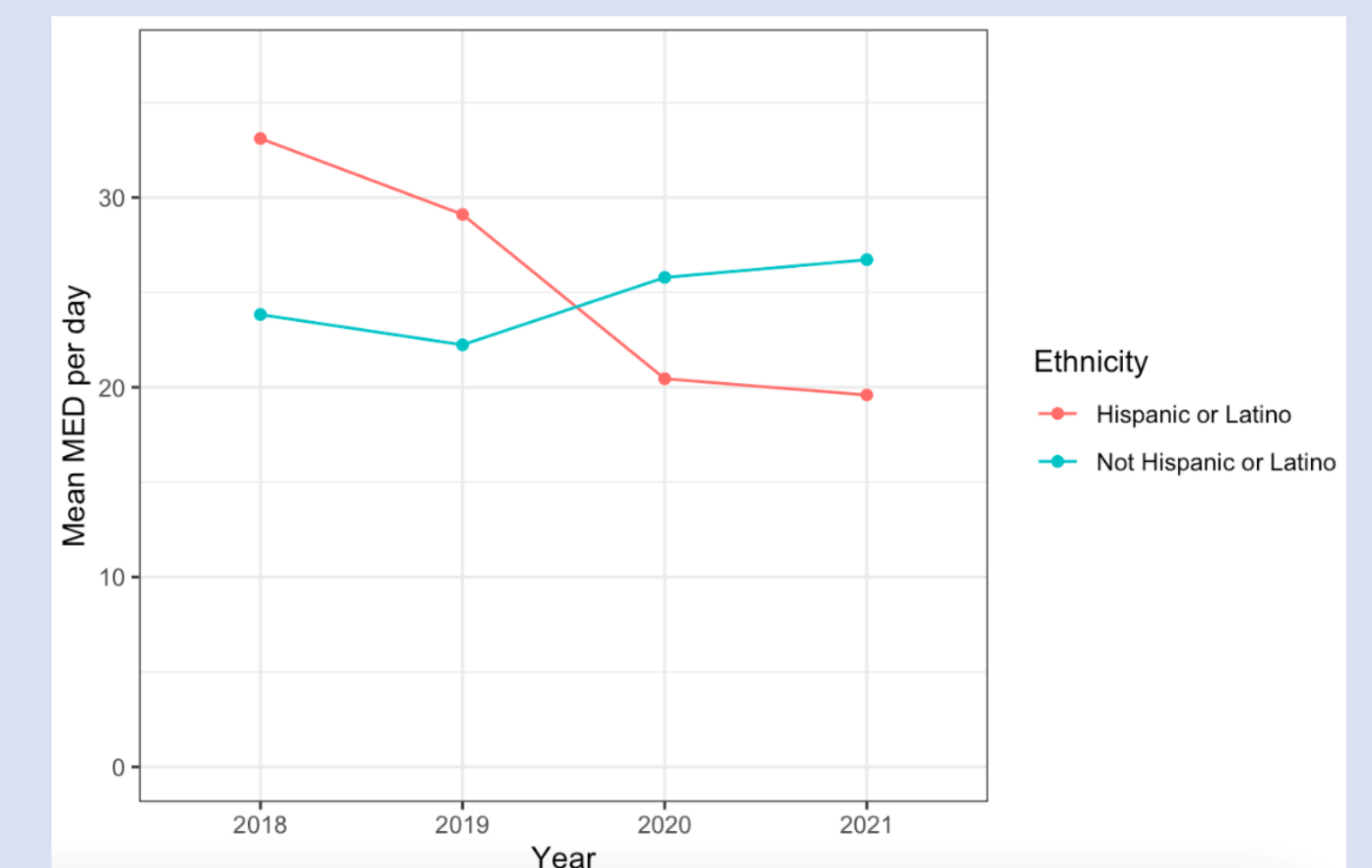
Proportion of patients with chronic pain receiving opioids over time, by race



Proportion of patients with chronic pain receiving opioids over time, by ethnicity



Mean MED for patients receiving opioids over time, by race



Mean MED for patients receiving opioids over time, by ethnicity

Conclusion

Our data demonstrate that COVID-19 did, in fact, have an impact on opioid prescribing in primary care, with opioid prescriptions increasing over the course of the pandemic. Further research in this area is required to better delineate the racial/ethnic stratifications and impacts of these prescribing patterns.

Further exploration is essential to determine how to best support primary care physicians in establishing sustainable opioid prescribing practices in the post-COVID landscape.