Decreasing the Harms from Prescription Drug Misuse: A Case for Pharmacists and Prescription Monitoring Programs

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Learning Objectives

By the end of this presentation, participants will be able to:

1. Delineate the contributions pharmacists can make in practice to help prevent and manage prescription drug misuse.

2. Describe the features of prescription monitoring programs and their role in addressing prescription drug misuse.
National Strategy

- 58 recommendations
  - Treatment
  - Prevention
  - Enforcement
  - Professional Education
  - Monitoring & Surveillance
    - Prescription Monitoring Programs

www.ccsa.ca
Pharmacists

- Responsible for the safe and effective use of medications
  - safe clinical use
  - safe medication distribution systems

- Medication management
Pharmacists - Treatment

- Assessment
  - medication reviews – indication, efficacy, safety, adherence
  - identification of drug therapy problems

- Care Plan
  - goals of therapy
  - medication changes

- Follow-up
  - monitoring
Care Plans

- Assist in designing plans to promote safe and effective use
- Managing drug interactions
- Structured Therapy
  - Restrictions on amounts
  - Observed administration
  - Returns/pill counts
Patch Returns

**Opioid Patch Exchange Disposal Tool**

E.g. Fentanyl **DURAGESIC** patch, Buprenorphine **BUTrans** patch

A patch exchange system is one way to promote the safe, effective and responsible use of opioid patches. While receiving prescriptions for the patch, you will be asked to return all used patches on a piece of paper like this. To use:

- stick the used patch on this sheet in the numbered boxes
- store this sheet out of sight and out of the reach of children/pets
- after applying your last patch, return this sheet with the used patches to the pharmacy in order to pick up your next supply
- in the future, you may just use a blank paper for this routine

Affix used patch to this sheet once removed from skin

Affix used patch to this sheet once removed from skin

Affix used patch to this sheet once removed from skin

1 2 3 4
Monitoring and Communication

- Frequent contact with patients
- Communicate clinical observations and interactions with patients
  - refill patterns
  - missed methadone/buprenorphine doses
  - intoxication
- Concomitant medications
Pharmacists - Prevention

- promote safe use
- promote safe storage
- facilitate the return of unused medication
Safe Storage Messaging

Table 2. Sources of diverted prescription pain medication among Ontario students in grades 7 to 12 who used opioids nonmedically in the past year: N = 624.

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<th>%</th>
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<tr>
<td>From home</td>
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<tr>
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<tr>
<td>Do not remember</td>
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</table>

*(Brands 2010)*

*(Peterborough County - City Health Unit)*

DID YOU KNOW?
ONTARIO STUDENT DRUG USE SURVEY 2019

1 in 5 youth reported non-medical use of prescription pain relievers...

74% got them from home.

SECURE ANY MEDICATIONS YOU ARE STILL TAKING.

KEEP TRACK OF QUANTITIES.

CLEAN OUT UNUSED, LEFTOVER MEDICATIONS.
Pharmacists - Enforcement

- Methods of Diversion
  - Thefts
  - Deception to obtain illegitimate prescriptions
  - Forged prescriptions
Minimizing Diversion

Strategies for pharmacists

- Examine the prescription to ensure its authenticity
- Contact prescriber directly to verify the prescription
- Identify the patient
- Observe for signs of drug intoxication and drug withdrawal
- Provide adequate storage security and limit access
- Keep records of all receipts and disbursements and check inventory regularly

Pharmacists - Education

Examples:
- Leslie Dan Faculty of Pharmacy - PharmD
  - incorporated into core curriculum
  - CAMH - experiential rotations
- CAMH - Practice Support
  - Safe prescribing courses
  - Opioid dependence treatment courses
  - Mentoring program
Monitoring & Surveillance

First Do No Harm Strategy Recommendations

- Develop a coordinated national surveillance system monitoring key outcomes related to misuse, abuse and harms
- Promote Prescription Monitoring Programs (PMPs)
PMPs - Purpose

- **Common themes:**
  - To enhance patient care by providing prescription monitoring information to assist in the safe use of controlled prescription drugs.
  - To help reduce the harms resulting from the use of controlled prescription drugs.
  - To assist in reducing the diversion of controlled prescription drugs.
Core Features of Prescription Monitoring Programs

- Program Administrators
- Prescription data collection
  - Selection of drugs to be monitored
  - Collection method
- Interventions
  - Clinician
  - Program
- Program Evaluation
Program Administrators

Most commonly:
- government
- physician or pharmacy regulatory/licensing authorities

Less commonly:
- law enforcement agencies
- substance abuse agencies
- consumer protection agencies
Prescription Data

- Selection of drugs to be monitored
  - Often based on Controlled Drug and Substances Act (CDSA) schedules
    - Opioids, barbiturates, stimulants
  - More variable inclusions:
    - Codeine, tramadol
    - Benzodiazepines, zopiclone
    - Anabolic steroids
    - Cannabinoids
Prescription Data

- US Schedules II – IV
- unpublished report - US states collecting data on all classes of controlled substances had lower rates of doctor shopping (Clark 2012)
- New York State benzodiazepine triplicate prescription program implementation
  - dramatic decline in benzodiazepine prescribing,
  - increase in other less safe drugs – e.g., meprobamate and chloral hydrate.
  (Weintraub 1991, Zullich 1992)
Prescription Data

- Collection method
  - Multiple copy/serialized prescription pads
  - Electronic submission from pharmacies

- Access
  - clinicians
  - licensing regulatory bodies, law enforcement
  - cross jurisdictional
National Association of Boards of Pharmacy (US) (NABP) InterConnect

designed to facilitate interoperability and interstate data sharing between PMPs

At least 26 states with MOUs – PMPs maintain control and autonomy of their data

Requests for patient information from other state’s PMP routed through InterConnect

www.nabp.net
Interventions - Clinicians

- Point of care access to patient information
- Increased use with electronic access (Fleming 2013, Green 2012)
- PMP data changed ER prescribing in ~10% patients (Weiner 2013)
- 5 states passed legislation making consulting the PMP databases mandatory
Interventions - Program

- notifications to prescribers, pharmacists, patients
- educational or punative purpose
- US – requirement to provide unsolicited reports to prescribers to receive funding
- providing a generic letter to prescribers regarding a patient reduced # prescribers and # prescriptions. (Gonzalez 2012)
Interventions - Program

- Questionable activity criteria:
  - number of prescribers, pharmacies, prescriptions
  - early refills, overlapping prescriptions
  - escalating doses, high dose
  - gender, age
  - type of monitored drug
Do these programs work?

- Very little data
- Is there ‘improved’ prescribing practices after regulatory intervention?
- Which program features are most effective?
  - Validity of criteria for questionable activity?
  - Alerts?
  - Real-time access?
- Is reduced prescribing the goal?
- Are these programs associated with reduced prevalence of abuse, addiction, overdose?
- Reduced diversion?
Prescription Drug Monitoring Programs: An Assessment of the Evidence for Best Practices

Prepared by
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Prepared for The Pew Charitable Trusts

Prescription Monitoring Programs in Canada: Best Practice and Program Review

June 2014

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PMP Research

- CIHR Population Health Intervention Research
  - Early evaluation of the Ontario Narcotics Monitoring System

- CIHR Canadian Research Initiative in Substance Misuse (CRISM)
  - Development of a Canadian PMP Research Network
Summary

- Pharmacists can and should contribute to reducing the harms and promoting safe use of prescription drugs associated with abuse/addiction
- Collaborate, communicate, develop relationships
- PMPs one important strategy to reduce prescription drug abuse
  - Monitoring
  - Intervention
- Evaluations needed
  - Effectiveness on appropriate outcome measures
  - Features of PMPs that contribute to effectiveness
References


