

# **NARCOTIC ADDICTION AND OVERDOSE**

**November 2006**

The initial PIAA Medication Error Study published in 1993 documented narcotic addiction and overdose issues to be a significant problem for all prescribers of narcotics and for primary care physicians in particular. Our own UMIA loss data analyzed on an annual basis has underscored that concern in recent years, most notably for Family Practice and Emergency Department physicians. This issue has been included as a component in our Risk Management workshops for over 10 years.

More recently, narcotic overdose and death is identified to be an escalating public health problem both nationally and regionally in Utah, correlating with a marked parallel increase in narcotic prescription and usage. The most frequent medications implicated in this problem in descending order of importance are:

1. Methadone
2. Oxycodone
3. Hydrocodone
4. Fentanyl

The problem involves both legal prescription use as well as illicit use of these medications. Preliminary Utah data points towards an increased risk with new prescriptions and recently increased doses. Additionally, Polypharmacy with Benzodiazepines and CNS depressants, such as muscle relaxers, can increase the risk of problems. Finally, obesity and untreated sleep apnea contribute to a greater risk of problems with the prescription of narcotic medications.

We are bringing this issue to the attention of our insured physicians because we believe it will become a significantly greater malpractice risk in the coming months and years. It will require increasing vigilance and focus on our part as practicing physicians if and when we prescribe these medications to reduce this escalating risk of patient injury.