



Opium Crisis and the Dentists' Role in Abuse Prevention

The opioid crisis has been identified as the worst addiction epidemic in the history of our Nation, with drug overdoses killing nearly 64,000 people annually.

In 2009, general dentists and oral surgeon were identified as the largest prescribers of opioids for patients 10 to 19 years of age--at over two times as many prescriptions than that by primary care or by emergency care physicians.

What steps may we take to have a positive impact in helping to reduce the abuse and adverse effects of opioids?

Patient Education: Discuss the need for pain management and what type of pain medications may be needed with your patients. Address the seriousness of a possible opioid addiction. Multiple studies have shown, and it is important for your patients to understand, that a combination of ibuprofen and acetaminophen provides better pain control following tooth extraction and dental surgery in most people.

Your patients should understand that your goal is to manage their pain, pre-, peri-, and post-operatively. The use of appropriate premedications to reduce inflammation, and to "get ahead" of the pain is just as important to discuss with patients as postoperative pain management. It is necessary for patients to understand that pain can properly be managed without opioid medications.

Reduce the number of pills prescribed: If in your best professional judgment an opioid is needed, reduce the limit the number of tablets. This is especially important in the younger population.

Some States have already limit the size of an opioid prescription to 3, 5, or 7 days' supply.

Some reminders from the ADA Policies and recommendations:

- Register for Prescription Drug Monitoring Program (PDMP)
- Take DEA or State certified CE programs
- Check the PDMP before prescribing controlled substances to an adult for the *first time*
- Do the above step *every time* for a patient younger than 18
- Always prescribe the lowest effective dose based on MME (morphine milligram equivalent)
- Do not prescribe a quantity more than what is needed for the expected duration of pain which is usually 3 days
- Never prescribe for more than 7 days.

How do medications compare?

| Medication | MME |
|-------------|------|
| Hydrocodone | 1 |
| Oxycodone | 1.5 |
| Codeine | 0.15 |
| Meperidine | 0.10 |
| Tramadol | 0.10 |

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