

Disposal of Unused Opioids: Opportunities and Barriers

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OPIOID PRESCRIBING ENGAGEMENT NETWORK

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- Disclosures

- Patent for the use of peripheral perineural dexmedetomidine alone and in combination with local anesthetics. Application number 12/791,506; Issue Date 4/2/13; Patent Number 8410140
- Consultant- Heron Therapeutics, Vertex Pharmaceuticals, Alosa Health, and the Benter Foundation; Expert Testimony

525 Foundation



Website:

<https://525foundation.org>

Framing the problem



Opioids prescribed for acute care often go unused



Unused pills are often not disposed of and become a source for misuse



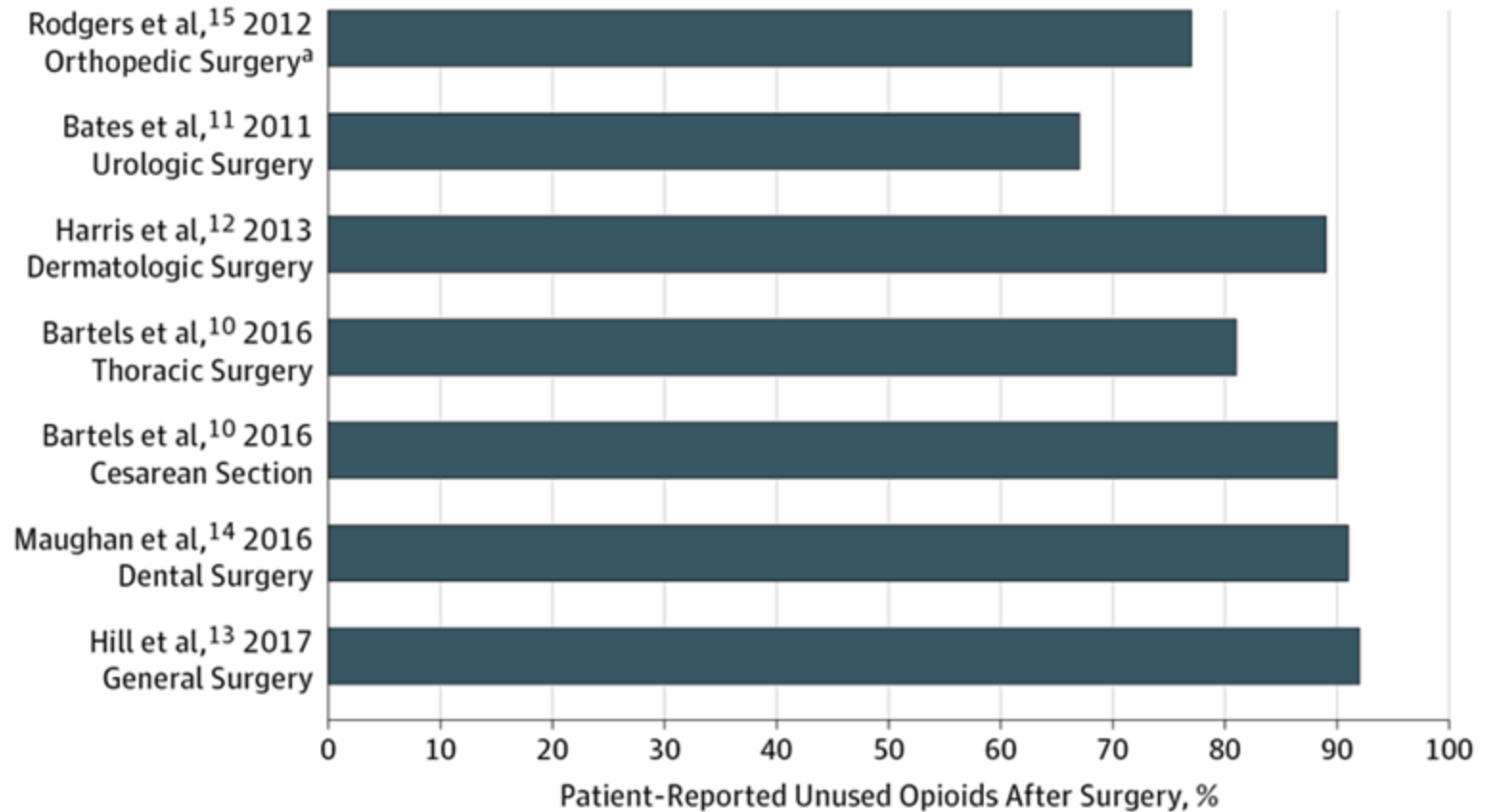
Environmental agencies discourage flushing



This is NOT an issue for people who use opioids routinely for chronic pain

Prescription opioids are commonly unused after surgery

- 6 studies of 810 patients
- Unused opioids in 67% to 92% of patients
- Of all pills, 42% to 71% unused
- 73% to 77% stored unsafely

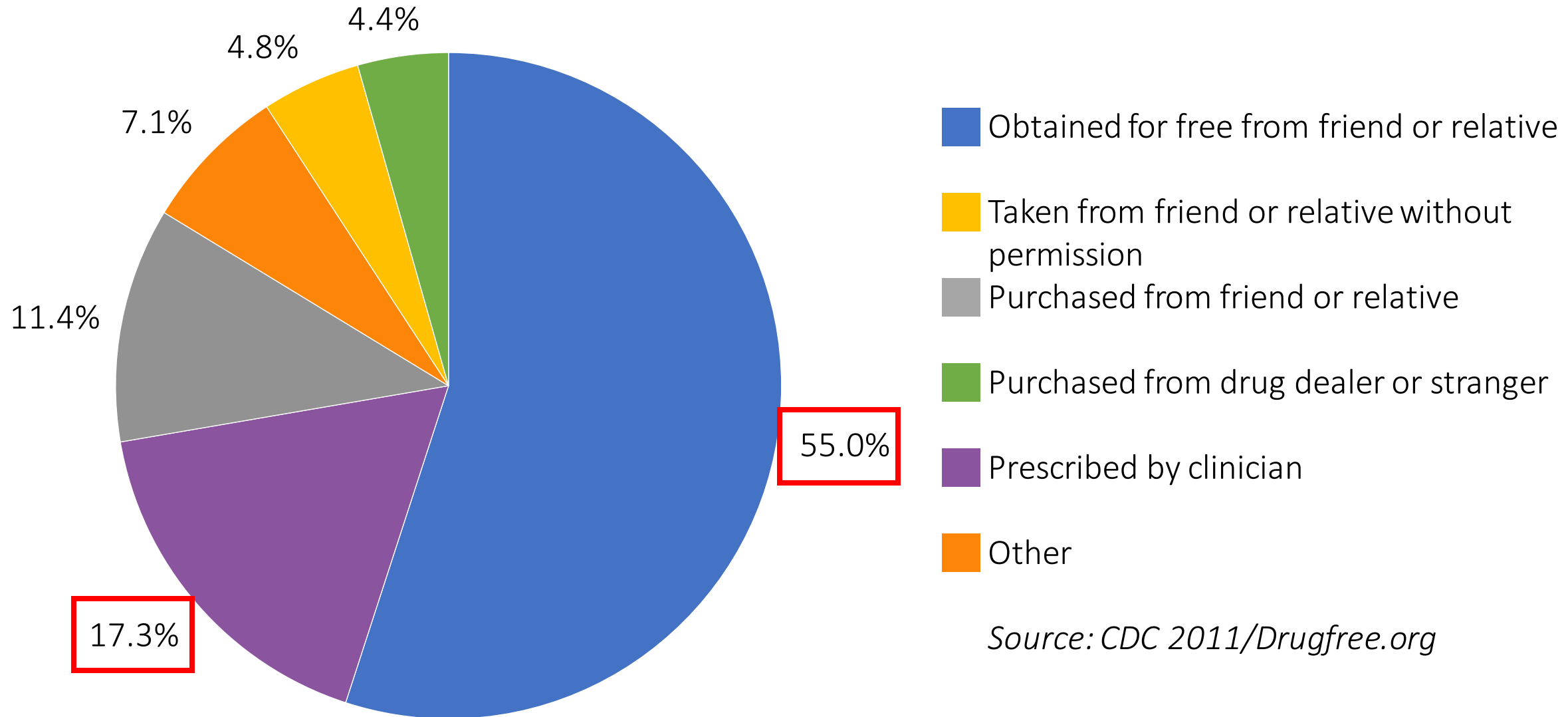


Bicket et al. (2017)

Prescription Opioid Analgesics Commonly Unused After Surgery: A Systematic Review
JAMA Surgery DOI: 10.1001/jamasurg.2017.0831



Sources of Prescription Opioid Abuse



TAKE BACK EVENTS

community locations



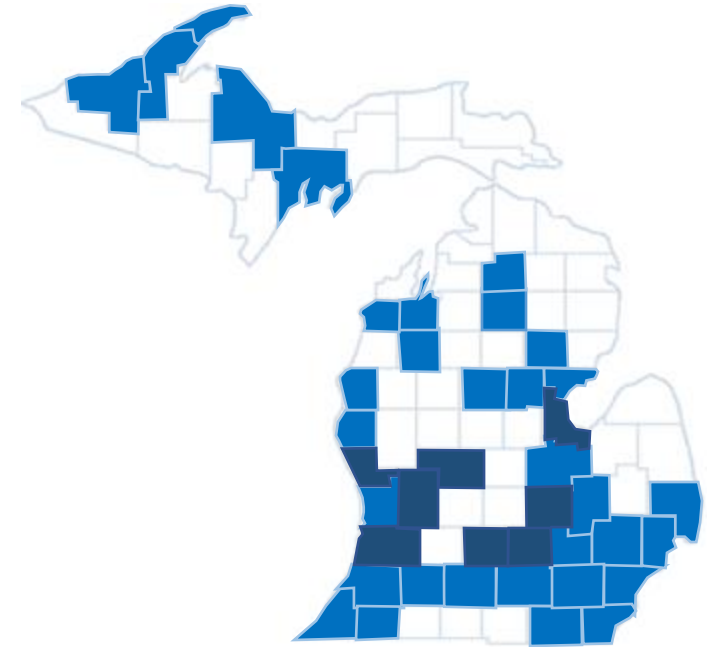
~28,000lbs

Unused Medications



~500,000

Opioid Pills



Over 100
sites in 46
counties

Acute care most common reason for opioid prescribing among those disposing at medication disposal event

Reason Prescribed	N	% (out of total disposal number)
Acute Care		
Surgery	402	40%
Dentistry	115	11%
Other Acute Care	75	7%
Chronic Pain	181	18%
Unknown	237	23%

**Medication Disposal Drive
Data 2016 and 2017
Ann Arbor, MI**

Brummett CM, unpublished data

Multiple options for safe disposal



Drug take back events

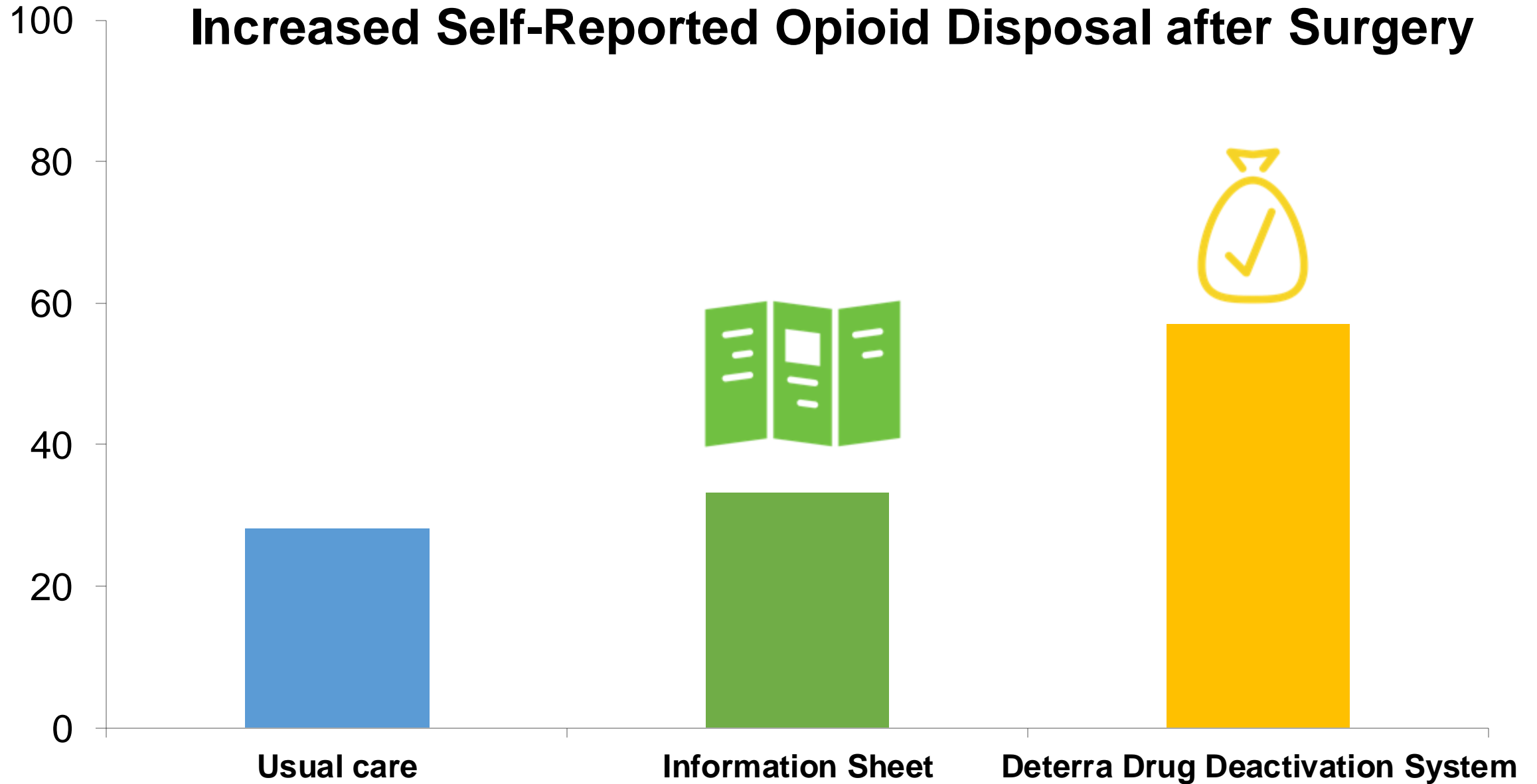


In-home disposal



Mail back programs

Activated Charcoal Bag for In-Home Disposal Increased Self-Reported Opioid Disposal after Surgery



Other RCTs of in-home disposal devices

	Number of participants	Disposal bag (n [%] disposed)	Control (n [%] disposed)	
Lawrence et al <i>JAMA Peds</i> 2019;173(8)	n = 202	66 of 92 (71.6%)	50 of 66 (56.2%)	Difference in proportions, 15.5% (95%CI, 1.7%-29.3%; p=0.03)
Agarwal et al <i>JAMA Net Open</i> 2022;5(5)	n = 302	75 of 125 (60%)	47 of 110 (42.7%)	Odds of self-reported disposal 2.01 (95%CI, 1.2-3.4)
Bicket et al <i>Pain Med</i> 2021; 22(4)	n = 499	10 of 73 (14%)	6 of 63 (10%)	Risk ratio 1.15 (95% confidence interval, 0.44 to 3.01)



NATIONAL POLL ON HEALTHY AGING

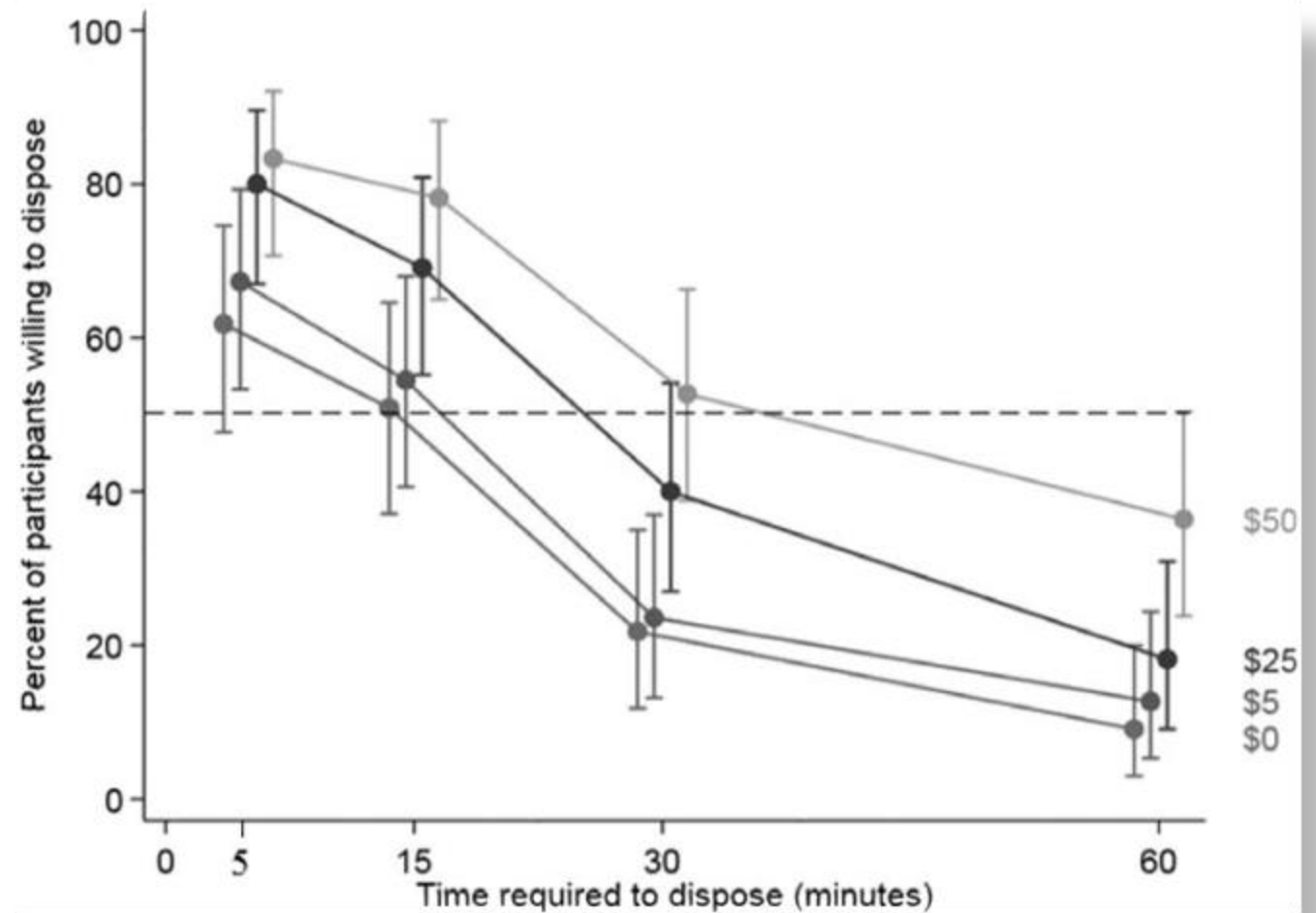
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July/August 2018



Harbaugh *et al.*
Reg Anes & Pain
Med 2020;45

Disposal convenience influences willingness to dispose more than financial incentives



Facilitators of Disposal



Convenience



Financial
Incentives



Safety of
Family Members



Moral Beliefs



Risk of
Addiction



Risk of
Theft

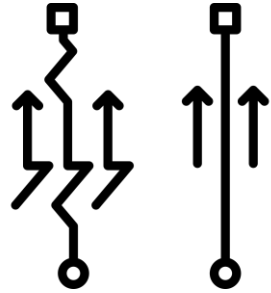


Risk of
Environmental Harms

Barriers to Disposal



Lack of
Awareness



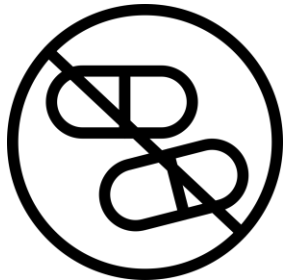
Less Convenient
Method or Process



Smaller Financial
Incentive



Anticipation of
Future Pain



Perception of
Opioid Scarcity



Desire to
Misuse Opioids



Low Perceived
Risk



Breakdown of
Patient/Provider
Relationship



OPEN toolkits for safe disposal



Find a safe
disposal
location
near you.



<https://michigan-open.org/safe-opioid-disposal/>

Our Initiatives



Prescribing
Recommendations



Community
Outreach



Naloxone

Transitions
of Care



Dentistry



Opioid Use
Disorder



Painless: The
Opioid Musical



Educate Providers,
Patients and
Communities



Inform Policy

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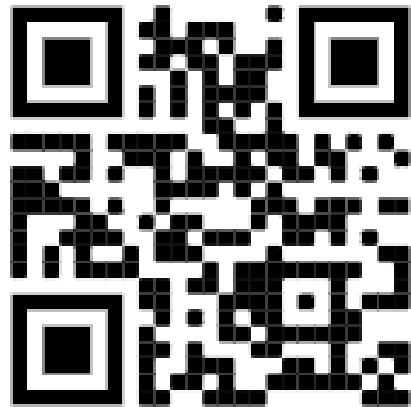
The Team.



Thank you!

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