

# Geography matters: Prescribing patterns for opioids in dermatology

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A new study suggests that opioid prescribing is not widespread among dermatologists, but opportunities exist in concentrated areas to reduce their use. The study appears online Feb. 7 in *JAMA Dermatology*.

"A small [number](#) of dermatologists account for a large percentage of the prescriptions. And it's concentrated among dermatology surgeons, who are likely giving a standard prescription for a four-day course of opioids after surgery," said Arash Mostaghimi, MD, MPA, MPH, Director of Inpatient Service in the department of Dermatology at Brigham and Women's Hospital. He led the study with colleagues from Harvard Medical School and Tufts University School of Medicine.

The researchers used 2014 Medicare Part D prescriber data to evaluate opioid prescriptions by US dermatologists. While they found that opioid prescriptions by dermatologists were few and concentrated in surgical practices, they also found higher rates of opioid prescribing among dermatologists in Southern states. Of the top 115 of prescribers, 108 (93.9 percent) worked in a surgical practice and 83 (72.2 percent) had practices in Southern states.

Of 12,537 dermatologists studied, 42.3 percent had no opioid prescriptions filled by Medicare patients and another 43.1 percent had 1 to 10 prescriptions filled. But 14.5 percent of dermatologists had more than 10 opioid [prescriptions](#) filled; these patients received on average one prescription for 4.4 days.

Based on existing literature about [opioid](#) use for pain control, particularly in elderly patients, the researchers projected that this use in dermatology could place up to 7,600 Medicare beneficiaries annually at risk of continuing to use opioids 1 year after their prescription, up to 22,800 at risk for gastrointestinal or central nervous system side effects, and close to 1,000 at risk for fractures.

"These numbers should remind us of the importance of emphasizing nonopioid pain medications after surgery in [dermatology](#)," said Mostaghimi. "As dermatologists, we need to revisit habitual post-operative prescribing of opioids. By reducing the number of opioids we prescribe, we may be able to help reduce the number of addictions and adverse events by the thousands."

**More information:** Cao, S et al. "Opioid Prescribing Patterns and Complications in the Dermatology Medicare Population" *JAMA Dermatol.* [DOI: 10.1001/jamadermatol.2017.5835](https://doi.org/10.1001/jamadermatol.2017.5835)

Provided by Brigham and Women's Hospital

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