

Poorest Americans most likely to have used prescription opioids—and most users view opioids positively

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Among older Americans, the poorest are the most likely to have used prescription opioids, according to a University at Buffalo study



providing new insights into unexplored contours of the opioid crisis.

The study also raises important questions about access to <u>pain</u> <u>management</u> options for the disadvantaged in the current climate of the <u>opioid epidemic</u>."The poor had about double the rate of <u>opioid</u> use compared to wealthier groups," says Hanna Grol-Prokopczyk, an assistant professor in UB's sociology department and the study's author. "The poor are the ones who have been disproportionately relying on these medications—and it's not always easy for them to switch to other ways of dealing with <u>chronic pain</u>."

Grol-Prokopczyk, an expert in chronic <u>pain</u>, says the poor are less healthy than the general population and experience more pain, but her findings, which focused on prescribed use, not misuse, of opioids, indicate that even for the same <u>pain level</u>, the poor were more likely to be using <u>prescription opioids</u>.

Little research on opioid use has focused specifically on older adults, despite their relatively high rates of opioid use and chronic pain. Some studies, without explanation, exclude adults over 65 altogether.

"Identifying the groups most affected by opioids is important because there are long-term risks from opioids even when used exactly as prescribed," she says. "These include increased risk of depression; suppressed immune function; and increased risk of death from causes other than overdose, such as cardiovascular and respiratory events. Policies and practices should make sure that disadvantaged groups receive information about the risks of opioids and have access to alternate pain treatments."

The results, which appear in the *Journal of Gerontology: Social Sciences*, are based on responses from 3,721 participants in the nationally representative Health and Retirement Study's 2005-06 Prescription Drug



Study.

"These data are particularly useful because they were gathered during the peak period of opioid use in the U.S.," says Grol-Prokopczyk. "Participants also self-reported their pain level as low, moderate or severe, and gave their opinions of the prescription drugs they were using."

Most study participants indicated they were happy with opioid effectiveness. More than 80 percent felt the medication was important to their health and over 75 percent responded that it was the best medication for their pain management. Fewer than 12 percent reported unpleasant side effects.

Now that the therapeutic landscape has changed in the face of the opioid epidemic and opioid <u>prescriptions</u> are harder to get, health care providers may instead recommend treatments that have limited insurance coverage or no coverage at all, such as physical therapy, cognitive behavioral therapy, hypnosis or acupuncture.

These often present challenges to poorer adults who might not be able to afford the alternatives or have the means to attend clinic visits that can span months or even years."Some pain researchers argue that the country is simultaneously experiencing an opioid crisis and a crisis of undertreated pain," says Grol-Prokopczyk.

"Effectively minimizing the risks of opioids while still addressing chronic pain will require understanding who is exposed to opioids, and ensuring that all groups can access alternate pain treatments."

More information: Hanna Grol-Prokopczyk, Use and Opinions of Prescription Opioids Among Older American Adults: Sociodemographic Predictors, *The Journals of Gerontology: Series B* (2018). DOI:



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