Nearly One-Fifth of Cirrhosis Patients Prescribed Opioids During Clinic Visits

ALEXANDRIA, Va. – A new study has found that among patients with cirrhosis, a late-stage liver disease, almost one in five outpatient clinic visits involve an opioid prescription. The study, presented this week at The Liver Meeting Digital Experience™ held by the American Association for the Study of Liver Diseases, also suggests that most of the physicians who prescribe opioids for patients with cirrhosis are not gastroenterologists or hepatologists, raising concerns those physicians may be less familiar with the potentially harmful effects of opioid drugs in patients with liver disease.

“Pain management for patients with cirrhosis can be difficult, and providers may feel they have few options other than opioids,” said Anna H. Lee, MD, an internist at the Ronald Reagan UCLA Medical Center and the study’s lead author. “Since opioid prescriptions are still largely fueling the opioid epidemic in our country, we wanted to observe these prescription patterns in patients with cirrhosis.”

Cirrhosis is a liver disease that involves the replacement of healthy tissue with scar tissue, eventually leading to irreversible organ damage and loss of function. People with cirrhosis who use opioids can develop side effects and require more care from their doctors.

“Proper functioning of many medications relies on metabolism in the liver. It is crucial that all prescribers be aware of the added harms associated with opioid use in patients with cirrhosis, such as the risk of hepatic encephalopathy and greater health care use,” Lee said.

Lee and other researchers at the University of California, Los Angeles, used data from the National Ambulatory Medical Care Survey (NAMCS) from 2006 to 2016 to identify, with medical codes, ambulatory care visits that involved patients diagnosed with cirrhosis to analyze. For ambulatory care visits in which there was an opioid prescription, researchers assessed the type of opioid prescribed, any associated pain diagnosis and whether it was an old or new prescription. They also compared the characteristics of patients and providers in the visits with and without an opioid prescription.

The study found that, of the 10.1 million ambulatory care visits with a diagnosis of cirrhosis:

- 53 percent of the visits were with gastroenterologists, including hepatologists.
- 41 percent were with primary care physicians (PCPs).
- An opioid was prescribed in 17 percent (1.7 million) of the visits. Of these prescriptions, 91 percent involved an opioid prescription renewal rather than a new prescription.
- Oxycodone and hydrocodone were the most frequently prescribed opioids.
• 68 percent of visits that included an opioid prescription were with PCPs.
• 29 percent of visits that included an opioid prescription were with gastroenterologists.
• There was a documented pain diagnosis in only 41 percent of visits in which an opioid was prescribed. The most common pain condition among these patients was musculoskeletal pain, followed by gastrointestinal pain.

“Since most opioid prescriptions are associated with primary care visits, we should target our educational efforts about harms toward primary care providers,” Lee said. “All clinicians can benefit from more education about safe options for managing pain disorders.”

Dr. Lee’s poster entitled “Opioid Prescription Patterns Among Ambulatory Patients with Cirrhosis: A Nationwide Analysis” (655) can be viewed at The Liver Meeting Digital Experience™. The corresponding abstract can be found in the journal HEPATOLOGY.

About AASLD
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