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period, the frequency of SSRI exposures increased by 19.9% (95% CI: 16.2%, 22.7%; $p < 0.001$), and the rate of SSRI exposures increased by 23.1% (95% CI: 15.2%, 29.2%; $p < 0.001$).

Conclusion: There was a significant increase in the reports of SSRI exposures during the study with sertraline being the most commonly reported SSRI. Suspected suicides was the most common reason for exposure. Greater intervention and awareness initiatives are needed considering the severity of such overdoses.

11 Characterization of Oxycodone Misuse using National Survey Data.

Christopher P. Holstege; Kawai Tanabe; Moira Smith; Saumitra Rege; *Will Goodrich*

Objectives: The objective of the study is to characterize the risk markers of oxycodone misuse using the nationally representative National Survey of Drug Use and Health (NSDUH) data.

Background: Drug overdoses continues to be a public health crisis with 70,630 fatalities in 2019. Approximately two-thirds of these deaths (66%) involved a prescription or illicit opioid. Synthetic opioids accounted for 72.9% of opioid-involved overdose deaths in 2019.

Methods: The 2019 NSDUH public use cross-sectional data were analyzed. The respondents were classified into two groups, past year oxycodone misusers and non-misusers, based on the screening questions assessing past year misuse of oxycodone products. The prevalence of selected demographic, clinical factors and substance use and abuse, including prescription medications, was assessed descriptively for the two population groups using cross tabulated frequencies and chi-square tests. Logistic regression models using a backward selection process were used to identify predictors of oxycodone misuse adjusting for covariates. Adjusted odds ratios (OR) and corresponding 95% Confidence Intervals (CI) were calculated.

Results: Overall, the 2019 NSDUH survey comprised of 56,136 respondents, of which 4,359 respondents (7.7%) reported using oxycodone products over the last year. Furthermore, 770 respondents reported misuse, accounting for 17.6% of the total oxycodone users or 1.4% of the survey sample. The proportion of past year oxycodone misusers was higher in males (54.1% vs 44.6%, $p < 0.001$), unmarried (69.6% vs 44.8%, $p < 0.001$), and Hispanic (16.3% vs 13.4%, $p < 0.001$). Suicide ideation was much more frequent in oxycodone misusers (19.8% vs 10.1%, $p < 0.001$). The prevalence of use and misuse of other substances in the previous year was significantly higher in the oxycodone misusers. Previous year marijuana use (OR: 1.90, 95% CI: 1.41 – 2.57) was a significant predictor of oxycodone

misuse while morphine users were 40% less likely to misuse oxycodone (OR: 0.60, 95% CI: 0.37 – 0.98). Similarly, hydrocodone use reduced the risk of oxycodone misuse by 64% (OR: 0.36, 95% CI: 0.26 – 0.50). Self-reports of obtaining the oxycodone from sources other than the doctors increased the risk of oxycodone misuse by 96% (OR: 1.96, 95% CI: 1.38 – 2.81). Hispanics (OR: 1.34, 95% CI: 1.02 – 1.55) had a significantly higher probability to misuse oxycodone. Oxycodone misuse was significantly more likely among misusers of other opioids including morphine (OR: 5.19, 95% CI: 1.62 – 15.12) and buprenorphine (OR: 2.42, 95% CI: 1.12 – 5.25). Previous year benzodiazepines misusers (OR: 2.44, 95% CI: 1.62 – 3.67), stimulant misusers (OR: 2.68, 95% CI: 1.71 – 4.21) increased the risk for oxycodone misuse in the past year. Males (OR: 1.60, 95% CI: 1.19 – 2.14) and individuals receiving medications for mental health treatment reported a higher risk of oxycodone misuse (OR: 1.46, 95% CI: 1.02 – 2.09).

Conclusion: The current study used data from a nationally representative sample and indicated a high prevalence of oxycodone misuse. Our study highlighted risk factors associated with misuse of oxycodone, including gender, use and misuse of other substances including other opioids appear to be important predictors of oxycodone misuse. Tailored interventions and risk-screening measures to optimize oxycodone prescribing might be key in limiting the misuse and diversion of this pain medication.

12 Incorporating a Resident-Driven Mentorship Program into Emergency Medicine Clerkship Rotations

Arlene S. Chung; Daniel Novak; Eric Lee; Jeanette Kurbedin; Sabena Vaswani

Presenter: *Mahlaqa Butt*

Objectives: We launched an EM resident-driven mentorship program to help medical students excel in their clerkships, develop relationships, and navigate residency applications. We hypothesize that students will rate the mentoring positively and will report that it improved their performance.

Background: Mentorship is important for professional growth and success in medicine. There are few formal mentorship programs for medical students on audition rotations.

Methods: Students were assigned a self-selected EM resident mentor for their four-week clerkship at a single institution. Allopathic and osteopathic students were matched with residents from MD or DO schools, respectively. Mentors were instructed to review: patient presentations, differential diagnoses, clinical decision-