

## AB202. SOH22ABS098. Quantifying the amount of controlled release opioids prescribed to the emergency surgery patients in the acute phase of their illness —a snapshot audit

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**Background:** Opioid use, and subsequent harm from opioids, has been increasing in developed countries for several years. Hospital admissions related to surgery or trauma have been identified as contributing to the increasing opioid use internationally.

**Methods:** Data was collected by the author during a week in November in a tertiary centre. All emergency surgery inpatients on the surgical ward were included in the study. Descriptive statistics will be used to describe baseline characteristics. Continuous variables will be described using the mean and standard deviation (SD). Student's *t*-test will be used to compare the characteristics of individuals who were prescribed controlled release opioids.

Results: A total of 24 patients were included in the study. Fifty percent of patients were prescribed a controlled release opioid. Average duration of prescription was 7.1 days. Average age of this cohort was 58.6 years. Of 12 prescriptions, the prescriber was unclear in all and justification for the prescription was apparent for one patient. On average, this cohort received 50 mg oral morphine equivalents in 24 hours of controlled release opioids and used 4.1 mg oral morphine equivalent in

immediate release opioids.

**Conclusions:** Despite the evidence base suggesting the use of the lowest effective dose of immediate-release opioids is preferred in the immediate postoperative period for a less than five-day course and the well documented harm caused by inappropriate opioid prescriptions, there is still improvements to be made.

**Keywords:** Anaesthesia; controlled-release opioids; emergency surgery; pain management; post-operative

## **Acknowledgments**

Funding: None.

## **Footnote**

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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doi: 10.21037/map-22-ab202

Cite this abstract as: Murphy L, O'Donnell B, Connolly M. AB202. SOH22ABS098. Quantifying the amount of controlled release opioids prescribed to the emergency surgery patients in the acute phase of their illness—a snapshot audit. Mesentery Peritoneum 2022;6:AB202.