

AB166. SOH23ABS_109. Audit of post-operative opioid prescribing in an Irish university teaching hospital

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Background: Opioids are effective in treating moderate-severe pain. However, their use is limited by risk of side effects. Although slow-release opioids have previously been prescribed routinely after surgery, their association with dependence is now well recognised. In this context, national guidance on opioid prescribing in acute post-operative pain was published in 2022.

Methods: A prospective audit was carried out in a large university teaching hospital over seven consecutive days in November 2022. The population of interest was adult in-patients three days post- surgery. Patients were eligible for inclusion if there was ≥ 1 active opioid prescriptions on their drug chart. Data on patients' demographics, anaesthetic and surgical factors, opioid drug choice and use of multi-modal analgesia were collected. Opioid prescriptions were audited against national guidance for opioid prescribing.

Results: A total of 51 patients and 62 opioid prescriptions were included. Some 54.7% (n=28) of patients were female and mean age was 60.7 years. Patients most commonly underwent general anaesthetic (n=38) and open surgery (n=45). Slow-release opioids accounted for 6.3% (3/48) of all opioid prescriptions initiated post-operatively. Immediate-release oxycodone was the most prescribed opioid overall (38/62). The intended duration, or need to review after four days, was not documented on any opioid

prescription. All patients were concomitantly prescribed at least one other analgesic agent.

Conclusions: In this prospective audit, the limited use of slow-release opioids post-operatively aligned closely with national guidance. However, documentation of intended duration of opioid prescriptions was poor, and should be a focus for change in future audit cycles.

Keywords: Analgesia; opioid; pain; stewardship; surgery

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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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