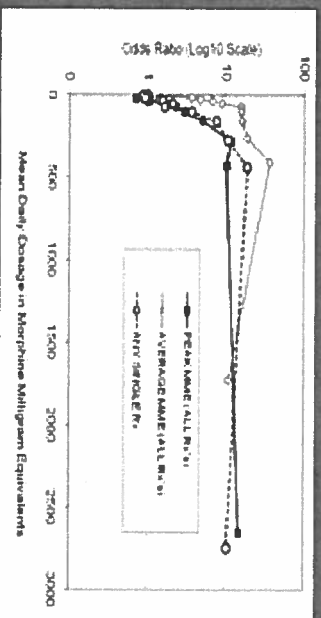
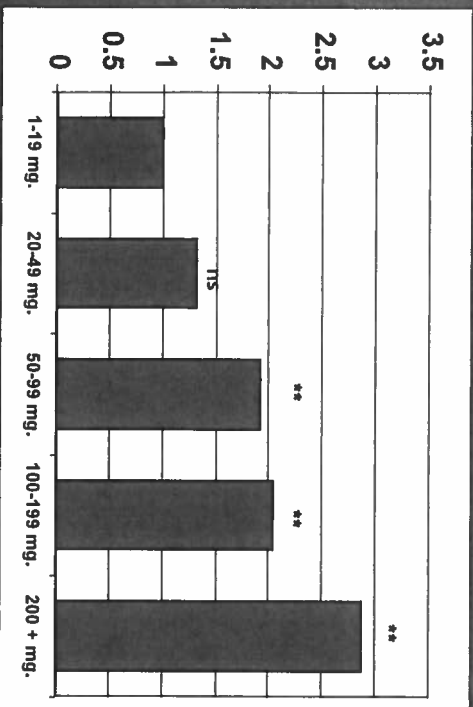


Crude association of daily dosage of opioid analgesics with risk of unintentional drug overdose death,

New Mexico, October, 2006–March, 2008

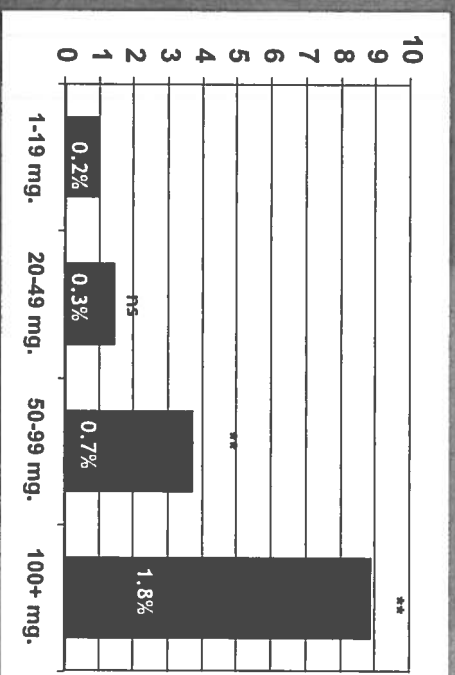


Paulozzi, et al. Pain Med 2012; 13:87-95

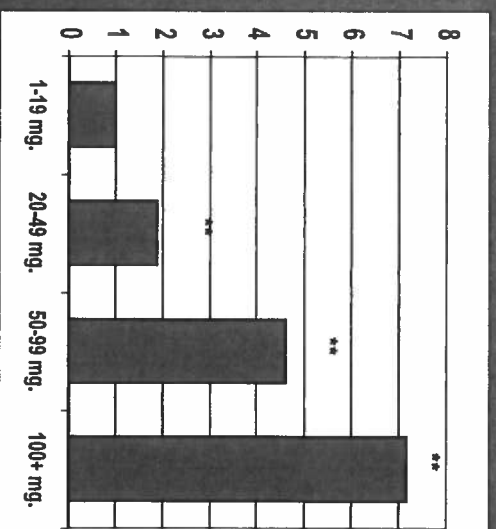


Gomes et al., Arch Int Med, 2011

## DEATHS AND HIGH DOSES



Dunn et al., Annals Int Med, 2010



Bohnert et al., JAMA, 2011

## PAIN AND FUNCTION OFTEN IMPROVE FOR PATIENTS WHO SUCCESSFULLY TAPER OFF OPIOIDS

- Brodner & Taub Mt Sinai J Med 1978;45:233-237
- Taylor et al Pain 1980;8:319-329
- Finlayson et al Pain 1986;26:167-174 & 175-18
- Ralphs et al Pain 1994;56:279-288
- Jensen et al J Consult Clin Psychol 2001;69:655-662
- Baron & McDonald J Opioid Manag 2006;2:277-282
- Hooten et al Pain Med 2007;8:8-16
- Townsend et al Pain 2008;140:177-189
- Kidner et al J Bone Joint Surg Am 2009;91:919-927

## OPIOIDS, FUNCTION AND RETURN TO WORK

Webster et al 2007 after controlling for covariates (including injury severity), mean disability duration, mean medical costs, risks of surgery and later opioid use all increase with MED

Franklin et al 2008 after adjustment for pain, function, injury severity and other baseline covariates, > 7 days opioid and > 1 prescription is associated significantly with work disability at 1 yr

Gross et al 2009 early opioid prescription and delayed recovery are associated, but likely explained by pain severity and other confounders

Volinn et al 2009 odds of chronic work loss 11-14 times higher for pts with opioid prescriptions at <90 days costs \$19,453 higher strong association suggests that opioid did not arrest the cycle of work loss and pain

Webster et al Spine 2007;32:2127-32

Franklin et al Spine 2008;33:199-204

Gross et al Spine 2009;35:525-31

Volinn et al Pain 2009;142:194-201