## **Opioid Prescription Liability Risks**



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Media coverage of what has been labelled an opioid crisis in the US and other countries has been common over the last decade and Australian practitioners are asking themselves if the same risks exist here.

In Australia, opioids accounted for just over three deaths per day in 2018. Pharmaceutical opioids are present in over 70% of opioid-induced deaths and deaths were most common among middle aged men.

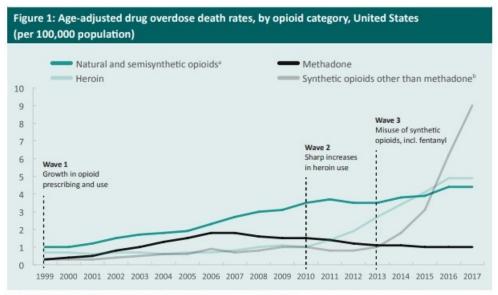
The manager of MIPS' indemnity services Russell Jones says there is a high risk of legal action in the event of an accidental overdose and with patients who allege damage as a consequence of long-term opioid prescription which is inadequately medically managed.

"We've seen members caught up in cases where an opioid prescription was the direct cause of an accidental death as well as in multi-toxicity cases. It is not uncommon for MIPS to see members drawn into a Coroner's inquest, investigations by AHPRA or Drugs and Poisons authorities concerning their prescriptions of opioids.

Fortunately, legal proceedings by the deceased's family are less common but the risk remains."

In the US, 46 people die every day from overdoses involving prescription opioids. This rate of overdose from prescription opioids has risen considerably in the last 5 years and exceeds illicit opioids such as heroin. In Australia, the story has some similarities. While heroin use in Australia is much lower than in the US, prescription opioids in Australia are responsible for twice as many drug-induced deaths as heroin since 2016.

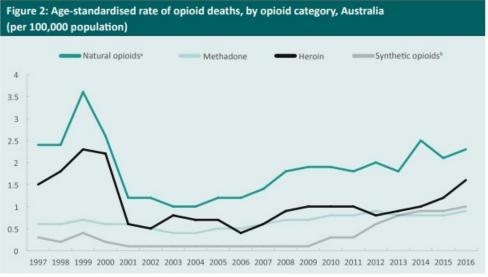
USA



a: Commonly prescribed opioids, including morphine, oxycodone and hydrocodone

b: Including both prescribed and illicitly manufactured synthetic opioids, such as fentanyl, fentanyl analogues and tramadol Source: Hedegaard, Miniño & Warner 2018 (Figure 4)

Australia



a: Including codeine, morphine, oxycodone, hydromorphone and buprenorphine

b: Including fentanyl, tramadol and tapentadol

Source AIHW 2018a (Table S3.19)

Charts courtesy of the Australian Institute of Criminology, Trends & issues in crime and criminal justice, July 2019.

The increase in prescription opioids being dispensed in Australia is driven primarily by oxycodone prescribing according to the Australian Institute of Health and Welfare. In the US, oxycodone sales increased four-fold over 10 years leading up to 2010 and in Canada prescription opioids became the fourth most commonly used recreational substance after alcohol, tobacco and cannabis.

Dr Rick Brown, Deputy Director of the Australian Institute of Criminology, was quoted in SBS' Dateline program in July this year that Australia does not appear to be as severely affected as the US. "We looked at what's happening in Australia within the context of what we know has been happening in North America – ending with a serious problem of Fentanyl misuse. We've overlaid that with what we know is happening in Australia and concluded that while there are some similarities, we're not on the same trajectory (in terms of size). We've recognised there are increases in opioid use and deaths from opioid use and heroin use – but the scale is a fraction of what we've observed in the US" said Dr Brown.

That's somewhat good news for Australian doctors but vigilance in prescribing will remain key to protecting yourself as a practitioner. A former Australian soldier returning home with injuries became addicted to opioids and between January and July of 2014, he consulted 28 doctors at 20 practices, gaining 32 prescriptions from 14 pharmacies. This was in addition to his theft of a prescription pad to forge scripts as well as altering scripts.

MIPS advises practitioners continuing to prescribe opioids to:

- Be cautious prescribing
- Be on the lookout for drug seekers
- · Ensure you have appropriate licences/permits with your state/territory's drugs units and/or the TGA
- Familiarise yourself with RACGP guidelines for drugs of dependence

## References

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