# Opioid-Related Adverse Events Increase Hospital Stays, Costs Of Care

Pacira Pharmaceuticals, Inc. [1] today announced the publication of findings from a retrospective analysis of more than 37,000 patients who underwent common inpatient surgeries at a large, 26-hospital healthcare system and received opioids for postsurgical pain management. According to the data, published in this month's issue of *Pharmacotherapy*, patients who experienced opioid-related adverse events (ORAEs) had statistically significantly higher hospital costs, longer hospital stays and increased risks of readmission and mortality.

Specifically, patients experiencing an ORAE:

- Had a *55 percent longer hospital stay* than patients without an ORAE (9.5 days vs. 6.1 days, $P$ <0.001)
- Had a *47 percent higher hospitalization cost* compared to patients without an ORAE ($21,012 vs. $14,291, $P$ <0.001)
- Had a *36 percentincreased risk of30-day readmission* compared to patients without an ORAE ( $P$ <0.001)
- Had a *3.4 times greater risk of inpatient mortality* than patients without an ORAE ( $P$ <0.001)

Researchers were also able to identify a series of characteristics that increased patients' risks for ORAEs. Predictive risk factors for an adverse event related to opioid use included: patient age of 65 or older, obesity, greater number of comorbidities and pre-surgery opioid use.

"This regionally focused analysis mirrors findings from previously published national analyses that demonstrated the meaningful and measurable impact of opioid-related adverse events on patient outcomes and healthcare system costs," said Dave Stack, President and CEO of Pacira Pharmaceuticals, Inc. "While opioids have long been the mainstay of postsurgical pain management, a recent groundswell of advocacy to mitigate potentially fatal side effects may drive a shift in the current postsurgical pain management paradigm toward non-opioid or opioid-sparing pain regimens, especially in high-risk patients."

In this retrospective analysis, researchers reviewed administrative discharge data at 26 hospitals in the southeastern United States, and identified 37,031 adult patients who underwent common soft tissue and orthopedic surgical procedures from January 2009 to December 2010. Among this patient sample, 98.6 percent received opioids after surgery, and 13.6 percent of those received a diagnosis of respiratory, gastrointestinal, central nervous system, urinary or other opioid-related adverse events during hospitalization.

Researchers conducted statistical analysis to evaluate risk factors that may predispose patients to postsurgical ORAEs and compared differences in length of stay, total hospitalization costs, 30-day readmission rates and inpatient mortality between the patients who experienced an ORAE and those who did not.

The research was supported by Pacira Pharmaceuticals, Inc. The full publication is available online here [2].

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