Background. Pharmaceutical opioid harm is of international concern, yet little is known about the contexts of use

In 2016, around 1 in 20 Australians used at least one pharmaceutical drug extramedically and nearly 1 in 25 used opioid pain medicines¹. The over- or inappropriate use of a pharmaceutical drug beyond medical or legal guidelines.

While established opioids such as oxycodone have been well-researched, newer opioids (e.g. Tapentadol) have received little research attention².

Methods. We examined free-text paramedic case notes of ambulance attendances to explore the contexts around the extramedical use of two prominent opioids - oxycodone and tapentadol.

Paramedics complete electronic patient care records (ePCRs) for each ambulance attendance, comprised of both pre-determined data fields and free-text fields for case notes. Analysis of ePCRs is ongoing at Turning Point for the Ambulance Victoria and National Ambulance projects. Cases were identified where the recent extramedical use of tapentadol and oxycodone was assessed to have significantly contributed to the attendance. Framework analysis³ was used to identify ‘contexts’ for extramedical use common to attendances for both tapentadol and oxycodone.

- The primary reasons for using opioid(s) extramedically are based on information provided by paramedics regarding the circumstances preceding use, the patient’s history, and their interpretations of the patients’ intentions.
- Three in ten (28%) attendances were for patients who had intended to suicide via overdose, and these cut across multiple contexts.
- One in five (20%) cases were unable to be suitably categorised and were left as ‘unclear’.

### Psychological Distress

Patient has taken a combination of temazepam, oxycodone and alcohol, with unclear self-harm intentions. Patient states they have no “wish to die but just want[s] to get away from things”.

### Social Stresses

Patient reports consuming a combination of medications not prescribed to the patient, including dexamphetamine, tramadol and oxycodone, along with alcohol.

Consumption in response to “argument” with, and “in spite against” partner. Patient “denies suicidal intent”, despite prior self-harm history.

### Physical Pain

Patient with existing mental health conditions took intentional overdose of tapentadol to relieve “chronic joint pain” that was not resolving with initial prescribed doses.

### Opioid Use Disorder

Patient states they “crushed an oxycodone tablet, mixed it with water and injected it” into their forearm to “overcome withdrawal symptoms” from existing opioid use. Developed gastrointestinal symptoms and family member called ambulance.

### Unintentional Nonadherence

Patient reports “accidentally mistaking” tapentadol tablets for paracetamol tablets and ingesting them. Patient then reports “feeling light-headed, is extremely anxious and hyperventilating”. Patient reported “extreme personal stress” with death of close relative and financial pressure.

Conclusion. Paramedics frequently attend patients who have used pharmaceutical opioids extramedically. These patients typically have complex physical and emotional pain needs and often use opioids in acts of self harm. This contrasts with other targeted studies that highlight the prevalence of ‘recreational’ and illicit use⁴, and poor health literacy leading to accidental overdoses⁵.

References

2. Wightman, R., et al. (2012). In Funders had no role in the study design, conduct, analysis, or interpretation.
4. Ritchie, J., & Spencer, L. (1994). Framework analysis³ was used to identify ‘contexts’ for extramedical use common to attendances for both tapentadol and oxycodone.

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