

Why does Tennessee need to address the opioid crisis?

Tennessee remains in the top 15 of all states in drug overdose deaths.

Each day, at least three Tennesseans die from an opioid-related overdose, which is more than the number of daily traffic fatalities.

Each year in Tennessee, more opioid prescriptions are written than there are people living in the state, with more than 1 million prescriptions left over.

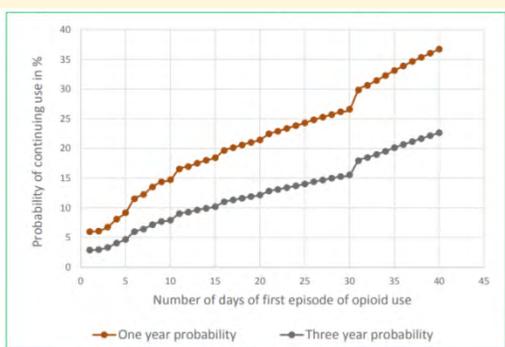
In 2017 in Tennessee, the amount of morphine milligram equivalents (MME) of opioids dispensed was enough to provide oxycodone 5mg three times a day to every man, woman, and child in the state for six weeks.

Why are prescription limits a solution to the opioid crisis?

More and more studies confirm that initial duration and dosage matter in determining an individual's likelihood of being on opioids long-term. By setting appropriate limits on initial opioid prescriptions while maintaining individualized pain management care, Tennessee encourages prevention of long-term opioid use and abuse.

Risk of Addiction and Abuse Grows with Duration and Dosage

The likelihood of continuing to use opioids increases most dramatically after the 5th and 31st days on therapy; the filling of the second prescription of opioids; a 700 MME cumulative dose of opioids; and first prescriptions with 10- and 30-day supplies. (CDC, 2017)



One- and three-year probabilities of continued opioid use, by duration of first episode in days.



Each refill and week of opioid prescriptions is associated with a large increase in opioid misuse among opioid naive patients. Duration of the prescription rather than dosage is more strongly associated with ultimate misuse in the early postsurgical period. (BMJ, 2018)



Treatment with opioids is not superior to treatment with non-opioid medications in improving pain-related function over 12 months. Results do not support initiation of opioid therapy for moderate to severe chronic back pain or hip or knee osteoarthritis pain. (JAMA, 2018)



New persistent opioid use can be considered one of the most common complications after elective surgery and is more common than previously reported. (JAMA Surgery, 2017)