Implementation of Strategies to Reduce Improper Disposal of TWIN CITIES ORTHOPEDICS **Opioids Following Orthopedic Surgery: A Pilot Study**

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BACKGROUND AND PURPOSE

- The opioid epidemic remains to be a challenging problem facing healthcare systems. Since opioids often prescribed in greater quantities than patient consume, proper disposal of unused medications crucial for the safety of both patients and the community.¹
- In 2017, there were more than 47,000 estimated deaths involving an opioid overdose.²
- Orthopedic surgeons are the third highest prescrib of opioids.³
- It was reported that approximately 10.3 million people misused an opioid in 2018 in the United States, with more than half of people obtaining the medications from a friend or relative.⁴

METHODS

- In an effort to combat improper disposal of opioid single ambulatory surgery center provided a Dete Disposal Pouch (DDP) to patients following their elective outpatient surgeries.
- Patients were given the bag at discharge in additito instructions on its usage and purpose.
- All patients undergoing elective orthopedic surger noted their opioid disposal technique via an automated survey 2-weeks post-operatively to compare pre-implementation (12/2018-02/2019) versus post-implementation (12/2019-02/2020) c the DDP.
- Data was compared for improper disposal (storing prescription, flushing down the toilet, etc.) versus proper disposal (DDP, dropped at police station/pharmacy/city-hall, etc.).

	RESULTS
are ts is	 Prior to implementation of the DDF patients disposed of their opioids in versus 45.8% properly, and followin implementation, 49.1% disposed of improperly versus 50.9% properly (
	 This difference between 54.2% and statistically significant, yet may be clinically relevant (p=.502).
oers	 Post-implementation, 21.3% of pat of their opioids using the DDP.
е	Pre-DDP
	Improper Disposal 54.2%
	Proper Disposal 45.8%
	DDP Usage Rate NA
ds, a erra®	Table 1: Improper Versus Proper Opioid Di Implementation.
	DISCUSSION
ion ery	 There exists a large group of patients what and/or store opioid medications improperty
-	orthopedic surgery.
) of	 Comprehensive implementation and ed regarding proper use of the DDP led to d improper opioid disposal, with over 1 in utilizing the new disposal method.
s	 Even with education regarding proper d

improperly.

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CONCLUSIONS AND IMPLICATIONS

- This study provides valuable information about patient opioid disposal habits and an opportunity to further strengthen post-surgical education regarding proper disposal of opioids.
- This shows that patients are willing to adopt novel methods to dispose of their opioids properly. Additional efforts to educate staff, and therefore patients, about the DDP may further increase patient utilization rates.
- Perianesthesia nurses play an important role in educating patients about correct use and reasoning behind proper disposal of opioids. The authors recognize this data is preliminary, but further largescale studies are warranted to study effective opioid disposal.

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- P, 54.2% of improperly าg f their opioids Table 1).
- 49.1% was not deemed
- tients disposed

Post-DDP

49.1%

50.9%

21.3%

isposal Following DDP

ho dispose perly following

ucation decreases in 5 patients

lisposal of unused opioids following orthopedic surgery, many patients still disposed of their opioid medications



https://www.cdc.gov/drugoverdose/epidemic/index.html. Accessed

Methodological summary and definitions. Rockville, MD: Center for