Nearly 14% of overdose deaths

involved opioids and benzodiazepines in 2021

overdose deaths in <u>PA</u> were reported to be characterized by concurrent use of benzodiazepines and opioids (in 2022)

(Current as of 8/2023)



- Sun EC, et al. Association between concurrent use of prescription opioids and benzodiazepines and overdose: a retrospective analysis. BMJ. 2017;356:j760. [cited 2018 1.31.18 Available from: www.bmj.com/content/356/bmj.j760
- https://www.fda.gov/Drugs/DrugSafety/ucm518473. htm
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 PA Department of Health Interactive Data Reports: https://www.health.pa.gov/topics/programs/PDMP/ Pages/Data.aspx
- Yang, et al. Changes in Concurrent Opioid and Benzodiazepine Use Following a Low-Touch Prescriber Fax Intervention. https://www.jmcp.org/doi/ full/10.18553/jmcp.2020.26.2.160
- https://nida.nih.gov/research-topics/trends-statistics/ overdose-death-rates#:~:text=Benzodiazepines%20were %20involved%20in%2012%2C290,by%20those%20also %20involving%20opioids.

Opioids and Benzodiazepines

JUST SAY "NO" TO THE COMBO

Concurrent use of opioids and benzodiazepines is a dangerous combination:

- In 2021, nearly 14% of overdose deaths involving opioids also involved benzodiazepines
- In Quarter 3 of 2021, there were approximately 109,000 patients with overlapping opioid/benzodiazepine prescriptions
- Patients using opioids and benzodiazepines concurrently have an estimated <u>5-fold increase in overdose risk</u> compared with patients prescribed opioids alone
- In 2016, the FDA issued a <u>serious warning</u> against concurrent use of these drug classes²

WHY IS THIS A PROBLEM?

- Opioids and benzodiazepines both depress the central nervous system
- Common side effects of opioids and benzodiazepines include drowsiness, dizziness, and dependence/misuse/abuse
- Concurrent use, even at prescribed doses, increases the risk of significant respiratory depression and increases the risk of opioid overdose

WHAT CAN YOU DO?

- Use Pennsylvania's Prescription Drug Monitoring Program (PDMP) to identify all Schedule II-V controlled medications a patient may be taking
- Use <u>evidence-based screening tools</u> to identify patients at high risk for adverse events or dependence
- Consider a multi-modal approach to pain management
- If an opioid must be used, use an immediate-release opioid at the lowest effective dose
- Consider all drug therapy as part of a comprehensive patient- centered care plan
- Teach patients to <u>recognize opioid adverse effects</u> and symptoms of overdose such as sedation, difficulty breathing
- The FDA recommends that Medication-Assisted Treatment (MAT) of opioid use disorder (OUD) with opioids/opioid analogues should not be withheld in persons also on benzodiazepines or other CNS depressant drugs. However, due to the increased risk of serious side effects, patients on combined therapy should be closely monitored³
- Ensure all patients using opioids have Naloxone available in case of overdose

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