



Integrating an Opioid-Reduction Pain Management Protocol in a Small Private Hand Surgery Practice

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Background

- Media attention and scientific reports have highlighted the current opioid crises
- Large, integrated medical centers have demonstrated the feasibility of reducing opioid prescriptions for hand surgery patients
- We report the experience of transitioning to an opioid reduction pain management protocol in a small private practice

Methods

- July 2017: a two-person orthopedic hand surgery practice transitioned to an opioid reduction pain management protocol
- Included the use of automated emails to provide pain management handouts and pre-operative videos on pain and discomfort
- Reduced the default prescriptions given for routine operative procedures
- Patient pain was surveyed pre- and post-operatively on a 10-point Likert scale at 3, 6, 12, 24, and 52-weeks

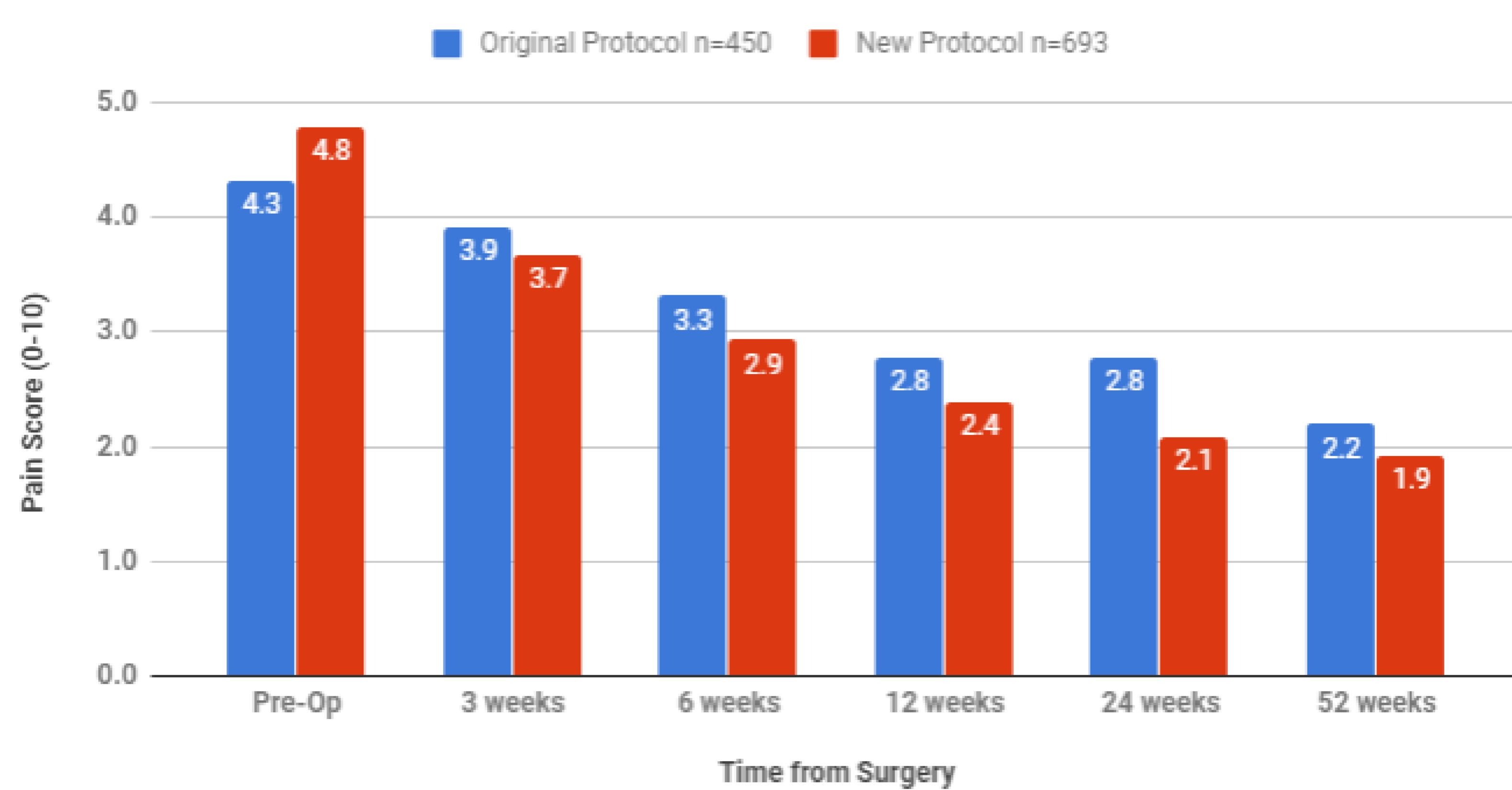
Results

- 450 patients enrolled in the “traditional” pain management group and 693 patients enrolled in the opioid reduction protocol (“new”)
- Baseline pain scores were comparable between the groups at 4.3 and 4.8, respectively (p=0.18)
- Post-operative pain scores were lower in the opioid reduction protocol at all time points
 - P<0.05 at 3 weeks and 24 weeks, p<0.01 at 6 and 12 weeks
- Sub-analysis of minor procedures revealed no change at any time point
- Sub-analysis of fractures demonstrated improved pain control at all time points
- “New” protocol reduced the number of new and refill opioid prescriptions

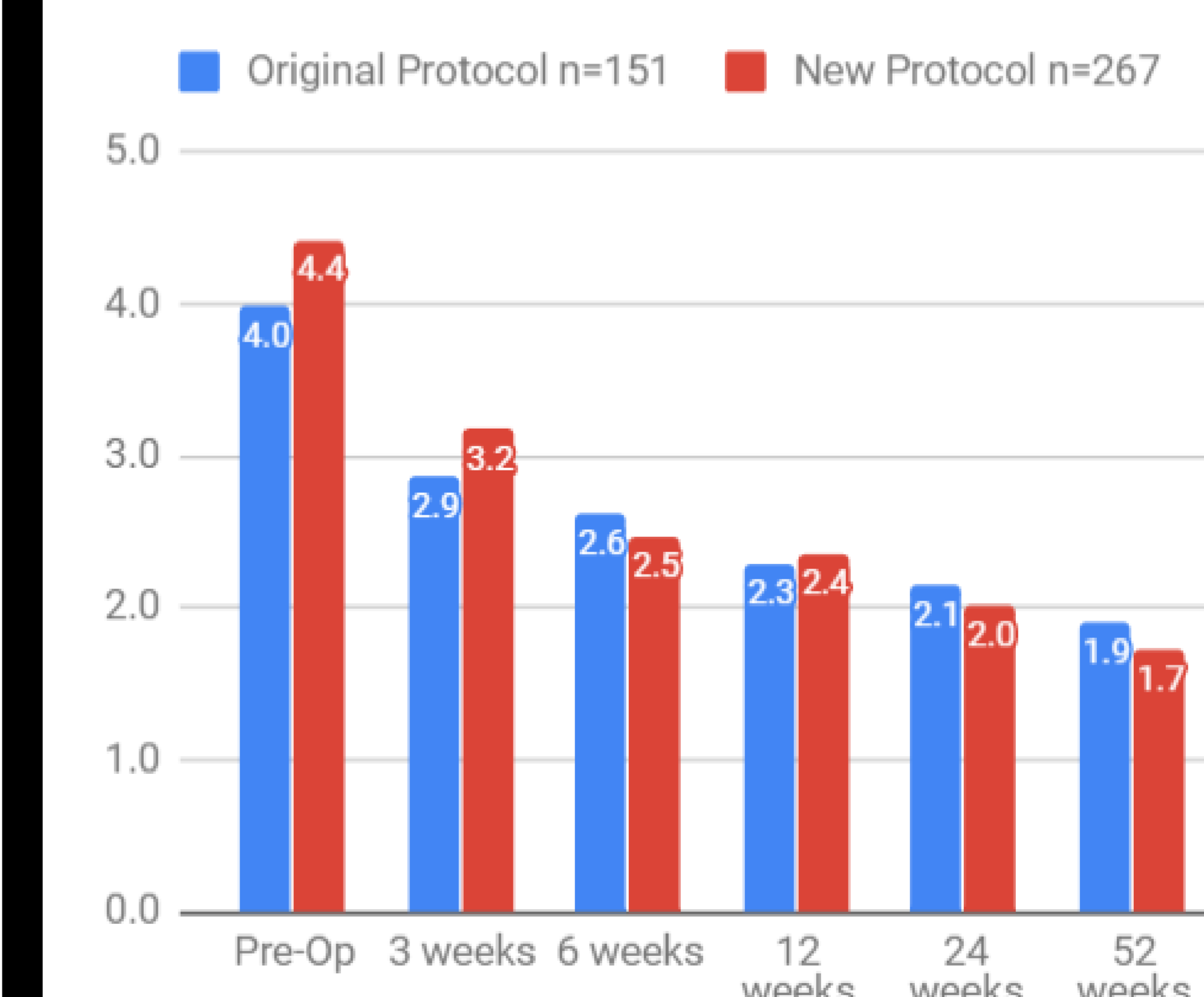
Summary Points

- Starting an opioid reduction protocol in a small hand surgery practice is effective
- Patients have better pain control with the new protocol
- Opioid reduction protocol was effective for soft tissue procedures and fractures
- Staff satisfaction was improved and refill requests were reduced with the new protocol

Pain Experience Before vs. After July 2017 Pain Management Protocol



Minor Procedures



Fractures

