

Opioid-naïve patients have increased new persistent opioid use following acute opioid prescribing after TSA



Stephen C. Weber, MD¹; Eve R. Glenn, ScB¹; Alexander R. Zhu, BA¹; Henry M. Fox, MD¹; James H. Padley, BS¹; Laurence Okeke, BA¹; Edward G. McFarland, MD¹

¹Division of Shoulder and Elbow Surgery, Department of Orthopaedic Surgery,

Johns Hopkins University School of Medicine, Baltimore, MD, USA



Disclosures

- Dr. Weber:
 - Paid Consultant for ProPharma, NDA Partners
 - Editorial or Governing board of Archives of Orthopaedic And Trauma Surgery, Arthroscopy, Journal of Shoulder and Elbow Surgery, SLACK Incorporated
 - Board of Directors member for AAOS, Arthroscopy Association of North America, International Society of Arthroscopy, Knee Surgery, and Orthopaedic Sports Medicine
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 - Disclosures are available at the AAOS website.



Background: Total Shoulder Arthroplasty (TSA)

- TSA encompasses anatomic and reverse shoulder arthroplasty (SA).
- TSA is a common procedure for shoulder osteoarthritis.^{1,2,3}
- Pain management often requires a multimodal approach (non-opioid analgesics, opioids, ice, TENS, etc.).^{4,5}

Opioids and TSA

- Opioids are effective for managing acute pain following TSA but carry significant risks.
- Overprescribing opioids after TSA increases the risk of dependency.⁶
- Orthopaedic surgeons rank 4th in opioid prescribing.⁷

Opioid-Naïve and New Persistent Opioid Use (NPOU)

- **Opioid Naïve Definitions:**

- Prescriptions within 1 year before hospital admission/discharge^{8,9}
- Prescription from 12 months-31 days before surgery¹⁰
- Use within 180 days before a procedure¹¹

- **NPOU (New Persistent Opioid Use) Definitions:**

- Prescription fills between 91-180 days after discharge¹²
- Opioid use within 60 days of first surgical anniversary⁸

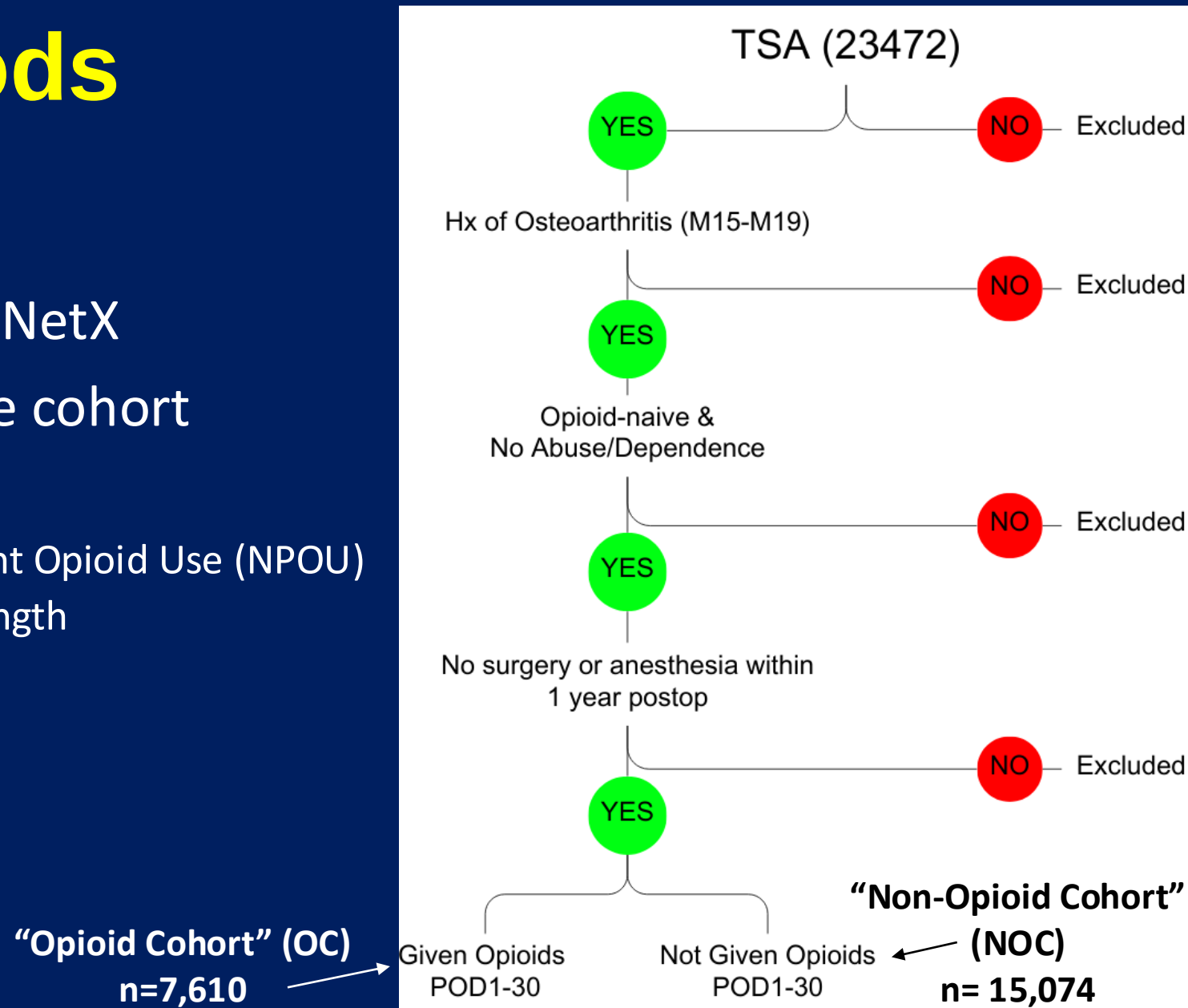
The present study:

Opioid naïve =no opioid prescription one year to two weeks prior to TSA + no previous abuse/dependency

NPOU = opioid prescription from 90 days to 1-year post-TSA

Methods

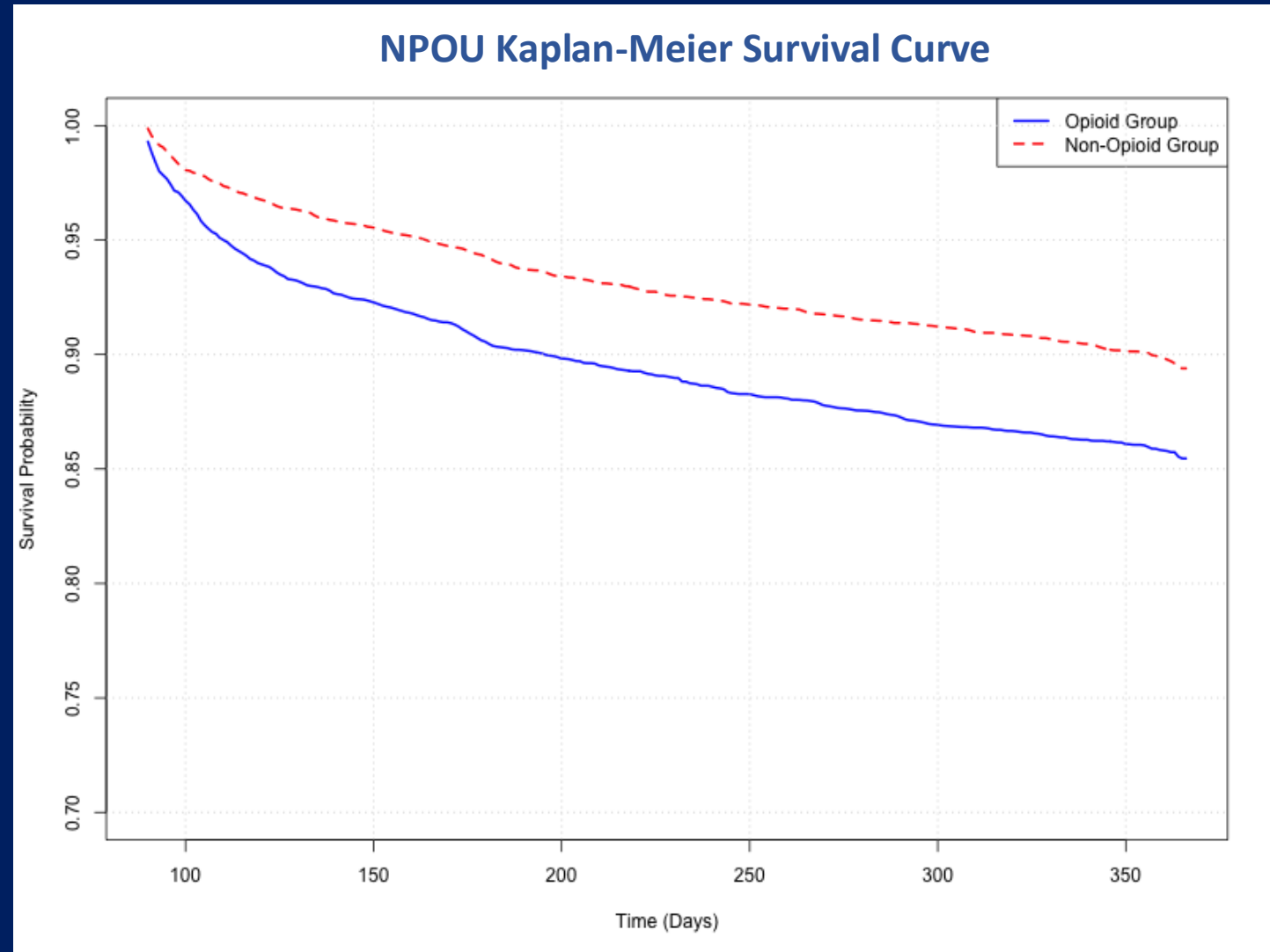
- Database: TriNetX
- Retrospective cohort
- Outcomes
 - New Persistent Opioid Use (NPOU)
 - Follow-Up Length



Results

	Cohort (N)	Age (Years)	Female (%)	Follow-Up (Days)	NPOU (N)
OC	6,977	68.7 ± 9.30	50.0	252.2 ± 146.4	720
NOC	6,977	68.8 ± 9.27	50.4	265.5 ± 137.7	538
P-Value		0.65	0.56	<0.001	<0.001

*Demographics of NPOU populations within each cohort unable to be assessed



Conclusion

- Opioid use within the first 30 days after TSA is associated with a higher incidence of NPOU within 90 days to 1 year post-TSA.
- Decreased risk of nonopioid substance use–related disorders in patients prescribed opioids.
- Shorter follow-up duration in the opioid cohort, possibly due to effective pain management or loss to follow-up due to opioid-related issues.

Discussion

- Careful opioid prescribing post-TSA may be critical to balancing effective pain management with the risk of long-term opioid use and dependency.

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