

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY DEPUTY T.A. COLES OF ST. HELIER SOUTH
QUESTION SUBMITTED ON MONDAY 18th SEPTEMBER 2023
ANSWER TO BE TABLED ON MONDAY 25th SEPTEMBER 2023**

Question

“In respect to prescribed opioid medications, will the Minister state –

- (a) what safeguards are in place to monitor and prevent addiction;
- (b) what opioid prescription guidelines are followed;
- (c) when the prescription guidelines were last reviewed; and
- (d) if records are kept regarding opioid prescriptions, and if they are, publish these for the last five years?”

Answer

- (a) what safeguards are in place to monitor and prevent addiction;
Safeguards currently in place include the following:
 - Services will follow the relevant guidance, which includes safeguards – available through professional bodies such as:
 - the Royal Pharmaceutical Society
 - the Royal College of General Practitioners
 - the Royal College of Nursing
 - Annual practice prescribing review meetings and 1:1 prescriber reviews include a focus on opioid prescribing.
 - Information about opioid prescribing is reported to GP practices. This includes the following data:
 - Amount of all opioid prescriptions
 - Amount of high dose opioid prescriptions
 - Amount of oxycodone prescriptions
 - Amount of Tramadol prescriptions
 - Amount of Dihydrocodeine prescriptions
 - Information is provided to allow practices and prescribers to highlight areas of practice for review.
 - HCS has a team of Clinical Pharmacists who review medicines prescribed to inpatients to ensure that they are appropriate for individual patients. High risk medicines are prioritised, which includes opioids.
 - Patients who have been administered Naloxone (which reverses the effects of opioids) are also reviewed as a priority, as this can indicate that a patient has received an overdose.
 - HCS has implemented an Electronic Prescribing system, which produces alerts if more than one opioid is prescribed at a time, so that prescribers are aware that they are prescribing another opioid.
 - HCS has a Medicines Optimisation Committee which provides oversight and assurance of the safe, effective and economic use of medicines within HCS.
 - The Pharmaceutical Benefit Advisory Committee (PBAC) is responsible for making recommendations to the Minister for Social Security for changes to the Approved List of Pharmaceutical Preparations (the ‘Prescribed List’).

- (b) **what opioid prescription guidelines are followed;**

It is useful to first describe what an opioid medicine is, as there are many different opioids of differing potencies:

- Opioids are a type of medicine that will help relieve pain. Weak opioids such as codeine and dihydrocodeine are used to treat mild to moderate pain. Strong opioids such as morphine and oxycodone are more effective for severe pain.
- The brain produces naturally occurring opioids to relieve pain. Most opioids medicines act at the brain’s opioid receptors meaning that they mimic the actions of naturally occurring opioids to relieve pain.
- Opioid tolerance can occur when a person taking opioid medication begins to experience a reduced response to the medication – meaning that an increase in the medication dosage is required to produce the same effects.
- Opioid dependence occurs when the body adjusts its normal functioning around regular opioid use. Unpleasant physical symptoms can occur when the medication is stopped.

Prescribers will use various resources to aid with their prescribing. With specific regard to opioids. This includes:

- Guidance produced by the Faculty of Pain Medicine of the Royal College of Anaesthetists
- Guidance from the National Institute for Health and Care Excellence (NICE)

(c) when the prescription guidelines were last reviewed; and

The guidelines are produced by national bodies who will update them when appropriate.

(d) If records are kept regarding opioid prescriptions, and if they are, publish these for the last five years?

The number of prescription items dispensed by the Hospital Pharmacy – for outpatient and discharge prescriptions:

2018	2019	2020	2021	2022	2023
6747	5809	6211	6532	6456	4859

The number of prescription items dispensed by Community Pharmacies:

Year	2018	2019	2020	2021	2022	2023 (7 Months)
Total number of prescription items dispensed for an opioid	56,927	56,737	56,535	56,194	56,566	32,547

Further information

How opioid prescribing can lead to addiction:

- Opioids produce pain relief – and for some people – a sense of heightened wellbeing (euphoria).
- Experiencing euphoria after taking opioids may be a warning sign of vulnerability to opioid addiction. This can occur in people taking opioids as prescribed.
- Other contributing factors to addiction may include family history and environmental and lifestyle factors.
- The decision to prescribe a medicine – including opioid medicines – is a clinical one, which is the responsibility of the prescriber. This includes responsibility for reviewing the effectiveness of medicines and an understanding of any side effects.
- Prescribers should only prescribe enough of a controlled drug to meet a patient's clinical needs for no more than 30 days.

Details on addiction and signs of:

- Addiction is different to dependence.
- Addiction features tolerance and withdrawal but is also accompanied by cravings, lack of control, overuse and continued use despite harm.
- Addiction is also associated with problematic behaviours including dose escalations - which are not prescribed.