New CDC Opioid Prescribing Guidelines

Improving the Way Opioids are Prescribed for Safer Chronic Pain Treatment



The problem:

Existing guidelines vary in recommendations, and primary care providers say they receive insufficient training in prescribing opioid pain relievers. It is important that patients receive appropriate pain treatment, and that the benefits and risks of treatment options are carefully considered.



259 million

In 2012, health care providers wrote 259 million prescriptions for opioid pain relievers – enough for every American adult to have a bottle of pills ¹



300% increase

Prescription opioid sales in the United States have increased by 300% since 1999², but there has not been an overall change in the amount of pain Americans report^{3,4}.



2 million

Almost 2 million Americans, age 12 or older, either abused or were dependent on opioid pain relievers in 2013.⁵



16 thousand

In 2013, more than 16,000 people died in the United States from overdose related to opioid pain relievers, four times the number in 1999.⁶

Improving practice:

Improving the way opioids are prescribed through clinical practice guidelines can ensure patients have access to safer, more effective chronic pain treatment while reducing the number of people who misuse, abuse, or overdose from these powerful drugs.

¹Paulozzi, Mack, & Hockenberry, 2014

²CDC. Vital Signs: Overdoses of Prescription Opioid Pain Relievers – United States, 1999 – 2008. Morbidity and Mortality Weekly Report 2011: 60(43); 1487-1492. Available at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6043a4.htm?s_cid=mm6043a4_w#fig2. August 17, 2015.

³Chang H, Daubresse M, Kruszewski S, et al. Prevalence and treatment of pain in emergency departments in the United States, 2000 – 2010. Amer J of Emergency Med 2014; 32(4): 421-31.

⁴Daubresse M, Chang H, Yu Y, Viswanathan S, et al. Ambulatory diagnosis and treatment of nonmalignant pain in the United States, 2000 – 2010. Medical Care 2013; 51(10): 870-878. ⁵SAMHSA, 2014

New Prescribing Guidelines

The Centers for Disease Control and Prevention (CDC) is publishing new opioid prescribing guidelines for chronic pain. The agency is working for timely release of the guidelines while ensuring that the development process:

- Meets scientific standards
- Includes expert consultation
- Allows for appropriate stakeholders to provide input
- Facilitates partnership development to enhance dissemination and uptake

Intended Purpose and Use of Guidelines

The purpose of the CDC guidelines is to provide recommendations for the prescribing of opioid pain relievers for patients 18 and older in primary care settings. Recommendations focus on the use of opioids in treating chronic pain (i.e., pain lasting longer than 3 months or past the time of normal tissue healing) outside end-of-life care.

Clinical practices addressed in the guidelines:

- Determining when to initiate or continue opioids for chronic pain outside end-of-life care
- Opioid selection, dosage, duration, follow-up, and discontinuation
- Assessing risk and addressing harms of opioid use



Guidelines Development: Methods and Processes

CDC used the Grading of Recommendations Assessment, Development, and Evaluation method to guidelines development (www.gradeworkinggroup.org). This method uses a transparent approach to grading quality of evidence and strength of recommendations. Four factors were used to determine the recommendations: 1) quality of evidence, 2) balance between benefits and harms, 3) values and preferences, and 4) costs. CDC also has developed a tiered approach to involve stakeholders in guidelines development.

Core Expert Group

The Core Expert Group includes CDC scientific staff, professional society representatives, subject matter experts, state agency representatives, and an expert in guidelines development methodology. This group reviews the evidence and consults on CDC-drafted recommendations.

Stakeholder Review Group

The Stakeholder Review Group includes a larger group of interested stakeholders that reviews the draft of CDC guidelines to improve the specificity and applicability of the recommendations. This group includes representation from professional medical organizations, community groups, and other organizations with an interest in pain management.

Peer Review and Public Comment

CDC has invited subject matter experts and the public to provide an independent review of the recommendations to ensure scientific quality and reasonableness of the recommendations.

Federal Partner Review

Interagency collaboration is critical for translation of these recommendations into practice. Federal partners were asked to review the guidelines and identify venues for dissemination and implementation.