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Opioid Consumption after Orthopedic Surgery: Prospective Randomized Trial on the Effects of Preoperative Counseling

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Opioid Consumption after Orthopedic Surgery: Prospective Randomized Trial on the Effects of Preoperative Counseling

Introduction: Recently, there have been increases in morbidity and mortality associated with opioid medications. Physician overprescribing, particularly within orthopedics, contributes to large quantities of leftover opioids, leading to an increased risk of non-medical opioid use and abuse.

Objective: To understand the role of preoperative patient counseling on postoperative opioid consumption, a prospective randomized study was done, with the idea that patients receiving counseling would take fewer opioids than their control counterparts.

Methods: Patients undergoing elective outpatient orthopedic surgery at Jefferson affiliate hospitals were enrolled over a 3-month period. Patients were randomized to a control group or to receive preoperative counseling in the form of a multimedia presentation aimed at educating the patient on opioid medications, strategies for pain management and the opioid epidemic. Information on demographics, surgical procedure, amount and type of opioid prescribed, number of opioids consumed and non-opioid analgesic use was collected at the first postoperative visit.

Results: 283 patients were enrolled (57% women, 43% men). On average, patients who were counseled consumed 2.30 fewer opioids than their control counterparts (P=0.0497), equating to 34% of their entire prescription, compared to 42% in the control. Among patients who were counseled, 84.16% thought the preoperative multimedia presentation was helpful and 92.86% thought that all patients should watch the video before surgery.
Discussion: There is evidence to suggest that preoperative opioid counseling is effective in decreasing postoperative opioid consumption. Leftover opioids totaled nearly 4,000 among all patients, indicating that orthopedic surgeons are prescribing far more than are being consumed.