Opioid overdose deaths reached a record high of more than 72,000 Americans in 2017,¹ a crisis so severe it has reduced American life expectancy. In 2018, following the declaration of the opioid crisis and the release of CDC and ADA opioid prescribing guidelines, the continual rise in opioid-related drug overdose deaths may have finally leveled off for the first time in almost three decades.²

However, the United States is still the world’s largest opioid consumer³ and prescriber, with prescription rates 50% higher than in Germany and a dental script rate 37% higher than in Great Britain.⁴ The over-prescription of opioids contributes to a surplus of opioids in our communities that can be diverted and misused,⁵,⁶ and is a leading cause of death of young people.⁷,⁸,⁹

In light of this crisis, we volunteered at one of the biannual medication “Take Back” events organized by Michigan Open Prescribing and Engagement Network (M-OPEN). The most recent fall Take Back event collected 3,120 pounds of medication from 34 counties, including approximately 46,230 opioid pills. Since its inception, M-OPEN and partners have removed a total of 9,600 pounds of medication and 172,700 opioid pills from households in Michigan.

Student perspectives
Medical and dental student exposure to opioids is often limited to lectures in pharmacology, pain management, and substance use disorders. Some prescribing guidelines may be covered, but information about safe storage and disposal is commonly overlooked throughout a student’s education and training. Not surprisingly, many patients and clinicians lack guidance on proper medication disposal,⁸ which is a missed opportunity. Similar to safe prescribing practices, safe storage and disposal of opioids play a role in eliminating unused opioids in our communities.

This view was reinforced at Take Back events, where we saw people disposing large amounts of medications. Not infrequently, individuals dropped off plastic lunch bags cramming with pills, and garbage bags full of medications from deceased relatives. While we were encouraged by the number of participants, witnessing the sheer volume of unused medications in our community was also unsettling. And, for every parent and grandparent who participated, we recognize that there were many others who did not. This highlighted the importance of proper medication disposal and the need for more engagement from local organizations and health centers,
including medical and dental practices.

Opioids are often medicine’s first-line solution for pain. Yet dentists, not physicians, are most often involved in the first instance of opioid prescription in a patient’s life — wisdom tooth extraction. In fact, American dentists write 31% of the prescriptions for those between 10-19 years, who are especially vulnerable to addiction. Every opioid prescription is a new exposure that could result in a patient becoming addicted. One staggering statistic is that physicians and dentists prescribe on average 50% more opioids than patients reported using. These excess opioids are often diverted potentially exposing more Americans to opioids and fueling the crisis.

Death inspires others

A recent local drug Take Back event included several medical residents, pharmacy students, nurses, and more. One of the volunteers was a mother and her daughter, whose father had died from opioid overdose earlier that year. His death had inspired her efforts to combat the opioid epidemic. Residents in the neighborhoods approached us with grocery bags full of unused medications — some from as far back as the 1980s! The transaction was neatly conducted on a tray, since volunteers are not allowed to touch the medications. Residents place their medications on the tray which is then transported to the Department of Health and Human Services bins for incineration to minimize our environmental impact. Many community members expressed gratitude, as they did not otherwise know how to dispose of their medications. They offered to spread the news to their neighbors so that fewer opioids get into the wrong hands.

Health care providers play a unique role in the crisis because we control the availability of opioids. While our intentions behind prescribing opioids are to

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To relieve pain and reduce suffering, we must first “do no harm” and make every effort to avoid over-prescribing. Prescribers should follow emerging recommendations to limit the number of opioids dispensed and offer non-narcotic alternatives for pain management and anti-inflammatory effects.17,18

We can also mitigate the effects of over-prescribing in our communities by promoting safe disposal. Dentists should instruct their patients on safe storage and disposal. Any unused opioids should be stored in a locked cabinet or lockbox or should be disposed of at a nearby pharmacy or law-enforcement station. Dentists can also contribute by volunteering at local Take Back events (see https://michigan-open.org/safe-opioid-disposal/disposal-map/), or partnering with M-OPEN to host their own event.

Narcotics can be brought to Meijer pharmacies during pharmacy hours. These pharmacies have a safe to hold these controlled substances. The safe is emptied nightly and the contents disposed of properly at a secure location.

The authors would like to thank the Michigan Dental Association and those who have promoted the recent Take Back event. Those interested in learning more about the Take Back events can contact the M-OPEN Collaborative Quality Initiative Coordinator at walisson@med.umich.edu.

The authors would also like to thank the Michigan Institute for Clinical and Health Research for supporting the Michigan OPEN Take Back Events. Michigan OPEN is supported by the Substance Abuse and Mental Health Services Administration, the Centers for Disease Control and Prevention, Medicaid, the Michigan Department of Health and Human Services, and the National Institutes of Health.

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