



# 6<sup>TH</sup> BIENNIAL SCIENTIFIC MEETING **2018**

MALAYSIAN ASSOCIATION for the STUDY of PAIN

**THEME: DELIVERING BETTER RELIEF FOR CANCER PAIN**



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**NATIONAL CANCER INSTITUTE  
PUTRAJAYA, MALAYSIA**

#### **CONFERENCE VENUE**

##### **NATIONAL CANCER INSTITUTE**

No. 4, Jalan P7, Presint 7,  
62250 W. P. Putrajaya,  
Malaysia

#### **CONFERENCE SECRETARIAT**

##### **MALAYSIAN ASSOCIATION for the STUDY of PAIN**

Department of Anaesthesiology,  
University Malaya Medical Center  
50603, Kuala Lumpur, Malaysia  
Tel : +603 - 7950 2052  
Fax : +603 - 7955 6705  
Email : [maspsecretariat@gmail.com](mailto:maspsecretariat@gmail.com)  
Website : [www.masp.org.my](http://www.masp.org.my)

## ABSTRACT



### Persistence Patterns of Opioid Use over Three Follow-Up Years: The Difference between Non-cancer and Cancer Pain

Asween Rowena Sani<sup>1</sup>, Che Suraya Zin<sup>1</sup>, Abdul Hadi Mohamed<sup>1</sup>, Munira Izzat<sup>2</sup>, Tan Hung Ling<sup>2</sup> and Ng Kim Swan<sup>3</sup>

<sup>1</sup>International Islamic University Malaysia, Kuantan, Pahang, Malaysia.

<sup>2</sup>Hospital Kuala Lumpur, Kuala Lumpur, Malaysia.

<sup>3</sup>Hospital Selayang, Selangor, Malaysia.

**Background:** This study examined the persistence patterns of opioid use in patients with non-cancer and cancer pain over three follow-up years.

**Methods:** Prescriptions issued between 1 January 2013 and 31 December 2015 were examined. Persistent opioid users were defined as wide, intermediate or strict. Wide definition refers to patients prescribed  $>0.7$ DDD or  $>16.7$ mg morphine equivalents (MME) for at least 3 quarters of a year, intermediate definition refers to patients prescribed  $>1$  DDD or 12.3 MME per day in a year, and strict definition refer to patients prescribed  $>2$  DDD or 49.3 MME per day in a year. Patients who did not meet any of the definitions were categorized as non-persistent. The proportions of each definition over a 3-year follow-up period were calculated. All analyses were stratified into non-cancer and cancer groups and were performed using Stata 13.

**Results:** The proportion of non-persistent opioid users were higher in non-cancer (86%) and cancer (94%) groups compared to persistent opioid users. Proportions of persistent opioid users in the wide, intermediate, and strict definitions who continued opioid treatment until the end of follow up period were 19% ( $n=4/21$ ), 43% ( $n=3/7$ ), and 25% ( $n=1/4$ ) in the non-cancer group, and were 6% ( $n=2/31$ ), 0% ( $n=0/3$ ), and 17% ( $n=1/6$ ) in the cancer group, respectively.

**Conclusion:** Patients in the intermediate and strict definitions were most likely to continue opioid treatment over a 3-year period in non-cancer and cancer groups, respectively. Future work in a large-scale study is required to determine factors related to persistence patterns explored which is important for improving pain management.