Effect of Gist Risk Messages on Parents' Decisions to Retain Leftover Prescription Opioids

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Opioid-Related Adverse Outcomes in Children



338,476 opioid poisonings in children (National Poison Data; '05 – '17)

9000 opioid-related deaths in children (CDC 2000-2016)

1 in 2611 Opioid Prescriptions to Children → Emergency room visit, hospital admission or death

> Bhatia D. Pediatrics 2020;145:e20192470 Gaither JR. Jama Netw Open 2018;1:e186558 Chung CP. Pediatrics 2018;142:e20172156

Opioid-Related Adverse Outcomes in Children

1 in 10 adolescents misused a prescription opioid (2017 Youth Risk Behavior Survey)



Toce MS. Jama Ped 2020; in press

Opioid Prescribing among Youth

- Opioids a mainstay for treating severe pain
 - 2.5 million annual exposures in children¹
 - 15% of children annually receive ≥ 1 opioid rx²³
 - 1 in 5 adolescents report use (12-17 yrs)⁴
 - Nearly 1/3 of young adults report use (18-25 yrs)⁴

¹Groenewald CB et al. Pain 2016;157:1021
²Chung CP. Pediatrics 2018;e20172156
³Hudgins JD. Pediatrics 2019;143:e20181578
⁴Hudgins JD. PlosOne 2019;16:e1002922



Parent Uncertainty about Risks

. . and the risk-reduction actions

2/3rds of parents keep left-over opioids



Voepel-Lewis T. Jama Ped 2015;169:497 Garbutt JM. Academ Pediatr 2019;19:103 Study Purpose

Does an interactive Scenario-Tailored Opioid Messaging Program (STOMP):

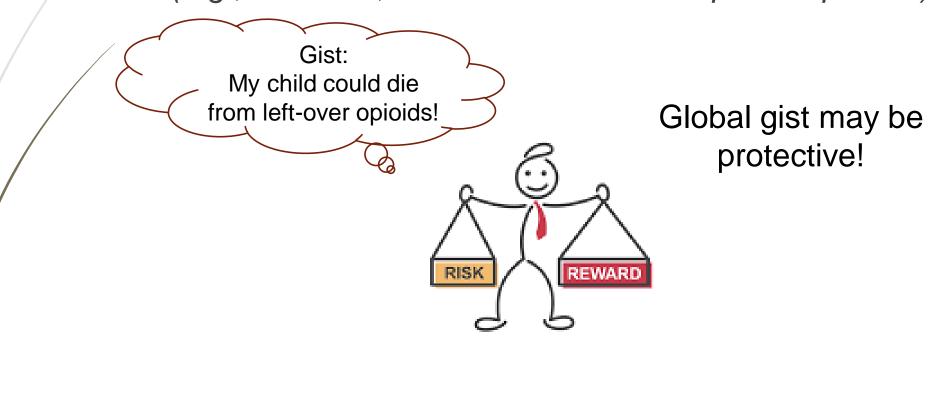
1) Enhance opioid risk perceptions and

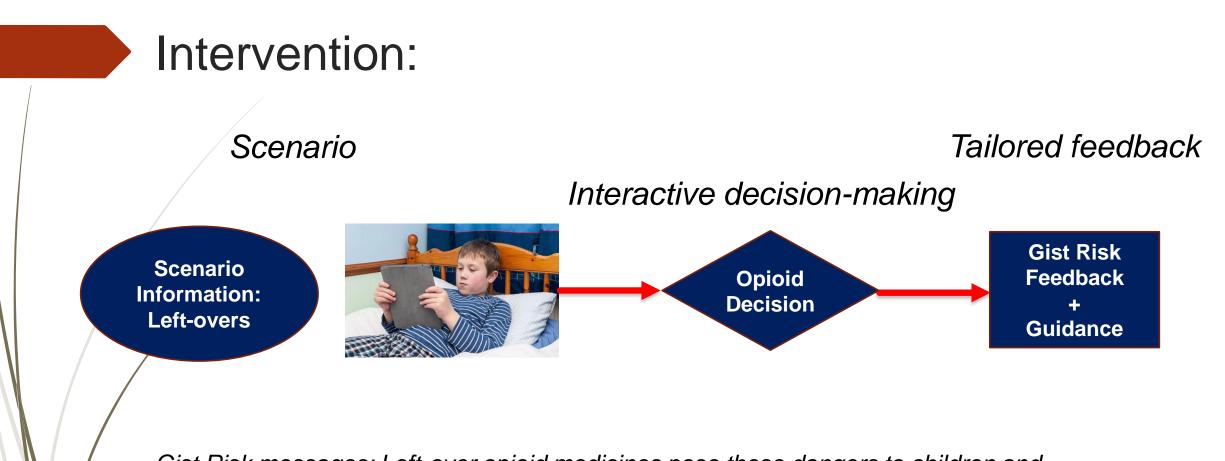
2) Improve parents' disposal intentions and behavior



Risky Behavior Associated with Understanding

Verbatim thinking promotes risk-taking when risk rates are low (e.g., 0.88/100,000 children die from opioid exposure)





Gist Risk messages: Left-over opioid medicines pose these dangers to children and teens. . .

Guidance:

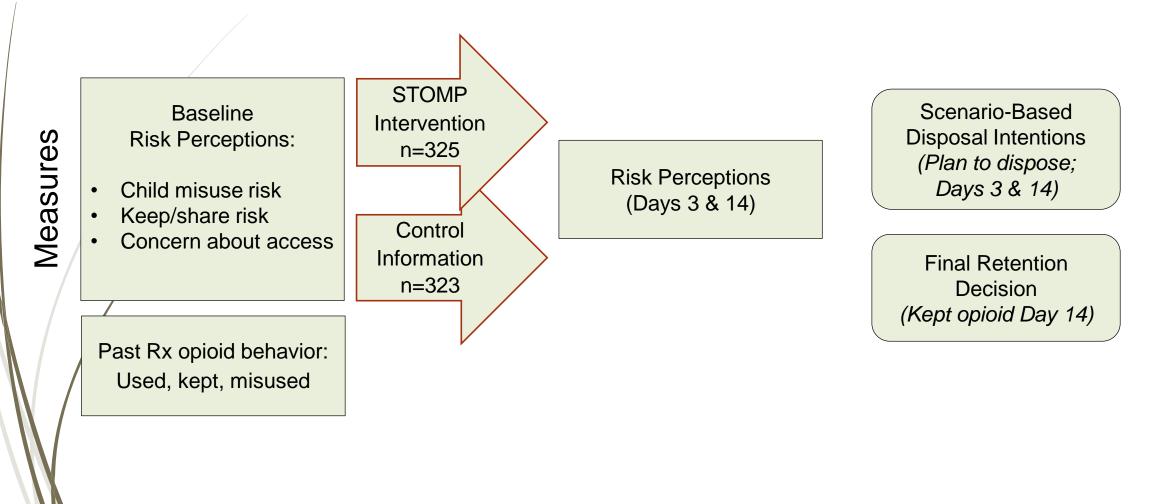
Getting rid of left-over medicines is the only way to ensure that they pose no risk to your children.

Sample

Parents (n=648)

- Children aged 5-17 years
- Undergo ambulatory or short-stay surgery
- Scheduled to get an opioid prescription (short-term use)





Results – Risk Perceptions

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Riskiness of keeping/sharing opioids (among adults)

Riskiness of child misuse (using/sharing without supervision)

Increased over time for STOMP group (*p<.001*) but not for controls

Concern/worry about child access to leftover medications

Decreased over time for parents in both groups (p<.001)</p>

Disposal Intentions

Factor	AdjOR	95% CI	p Value
STOMP (vs. Control)	1.36	1.05, 1.75	.020
Risk Perceptions			
Keep/Share Opioid	1.13	1.04, 1.23	<.003
Child Misuse	1.22	1.12, 1.33	<.001
Access Concern	0.97	0.90, 1.04	.370
Parent Female	1.59	1.17, 2.17	.003
Parent White (v. non-white)	1.47	1.04, 2.06	.028
Health Literacy	1.24	1.12, 1.37	<.001
Opioid in Home	0.45	0.34, 0.61	<.001
Past Opioid Misuse	0.49	0.33, 0.74	.001

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Retention of Leftover Opioid

Factor	Adj.OR	95% CI	P Value
STOMP	0.54	0.35, 0.82	.004
Risk Perceptions			
Keep/Share Opioid	0.84	0.75, 0.94	.003
Child Misuse	0.73	0.65, 0.82	<.001
Access Concern	1.06	0.95, 1.18	.307
Parent Female	1.66	0.99, 2.77	.057
Health Literacy	1.23	1.04, 1.46	.017
Past Opioid Misuse	2.59	1.46, 4.61	.001
Disposal Intention	0.93	0.86, 1.09	<.001

Conclusion

- Scenario-focused education about the bottom-line gist of the risks of left-over opioids enhanced parents' risk perceptions and decreased their retention of leftovers
- Past behaviors (keeping or misusing opioids) were associated with higher retention
 - Lower perceived susceptibility since "nothing bad happened before"
- Widespread implementation of similar interventions could effectively remove 6 to 12 million left-over opioid doses annually that may otherwise be retained
- Adapting this intervention may have the potential to reduce diversion and misuse of other controlled medications among children and teens



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