

Summary of research proposal LROI



Title:

Concurrent opioid and benzodiazepine prescriptions in hip and knee arthroplasty patients; a growing or a negligible problem?

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Abstract:

In a previous LROI study we showed that from 2013 until 2018 the prescription of opioids after hip and knee replacement increased. After knee replacement 58% of the patients picked up opioid medication at least once at a pharmacy in 2013 which increased to 89% in 2018. For patient with a hip replacement these numbers increased from 38% to 75%. Inappropriate opioid use may lead to poor outcome after surgery and addiction of these drugs. Moreover in 2018 in The Netherlands 1.4 million people received a benzodiazepine out of hospital, with the largest user group of both drugs being women aged over 45 years. Both opioids and benzodiazepines are highly addictive substances and have sedating effects. When used alone, they can repress respiratory, impair cognition, slow response times and increase the risk of falling. It is known that using both drugs together can be very dangerous. Therefore in several guidelines clinicians are warned not to prescribe them together. Nonetheless some studies have shown that patients frequently combine these drugs. However, European studies on this topic are lacking. Moreover it is not clear what the consequences of this concurrent prescriptions are in patients with a hip or knee replacement. In the Netherlands annually >65.000 patients undergo arthroplasty surgery, hence (chronic) opioid use in combination with benzodiazepines may be substantial, with a major impact on patients' lives and society. Therefore our aim is to evaluate opioid prescriptions in combination with benzodiazepines patients in with a hip or knee replacement.

This study is funded by an LROI Research Grant

Approval date: December 2022