Research Article Volume 01, Issue No. 02. 2025

The Medical Journal of Surgery and Anaesthesiology



Factors Associated With Opioid Use in Patients Hospitalized for Acute Pancreatitis

[1] Stephen, [1] Mario

[1] Faculty of Medicine, Maranatha Christian University, Bandung City, West Java, Indonesia

Correspondence : dr.stephen239837@gmail.com

Article History :

Received date : 2024/07/14
Revised date : 2024/08/19
Accepted date : 2024/09/21
Published date : 2025/01/10

Copyright: *© 2024 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (BY NC) license (https://creativecommons.org/licenses/by-nc/4.0/).*

ABSTRACT

Background: The literature review on opioid use in patients hospitalized for acute pancreatitis reveals significant insights into the factors that contribute to opioid utilization and the associated risks of opioid use disorder (OUD). **Literature Review:** (Charles Adejumo et al., 2021) highlight the importance of screening for current opioid misuse and identifying risk factors that complicate treatment, such as chronic pain and comorbidities. Their findings indicate a troubling trend of increased opioid prescriptions among patients with chronic pancreatitis, which raises concerns about the potential for developing OUD. They systematically review existing literature to underline the necessity for vigilant assessment of both pain management needs and risk factors for OUD, stressing that demographic and clinical factors significantly influence opioid misuse. Building on this foundation, (Baumann et al., 2023) delve into specific patient-related factors that elevate the risk of OUD, such as a history of mental illness and prior substance use. Their analysis reveals a direct correlation between higher opioid doses, prolonged usage, and the likelihood of developing OUD. They advocate for a comprehensive approach to pain management that integrates psychosocial interventions alongside pharmacological treatments, thereby addressing the multifaceted nature of opioid dependency. **Conclusion:** In conclusion, the literature underscores the pressing need for healthcare providers to adopt a proactive stance in assessing and managing opioid use among patients hospitalized for acute pancreatitis. By identifying risk factors and implementing holistic pain management strategies, the healthcare community can mitigate the prevalence of opioid misuse and its associated complications. The integration of both pharmacological and psychosocial approaches is essential to ensure effective pain management while minimizing the risk of developing OUD in this patient population.

Keyword: Factors Associated, Opioid Use, Patients Hospitalized for Acute Pancreatitis

Downloaded from The Medical Journal of Surgery and Anaesthesiology
Copyright © International Medical Journal Corp. Ltd. All rights reserved

INTRODUCTION

The intersection of opioid use and acute pancreatitis has garnered significant attention in recent years, highlighting the multifaceted factors that contribute to opioid utilization among hospitalized patients. In their (Charles Adejumo et al., 2021) study, Adeyinka Charles Adejumo et al. explore the predictors, rates, and trends of opioid use disorder (OUD) specifically among patients with chronic pancreatitis. The authors emphasize the importance of screening for current opioid misuse and identifying associated risk factors, which include not only the chronic pain experienced by these patients but also comorbidities that may complicate their treatment. The findings reveal a concerning trend of increased opioid use among this demographic, suggesting that ongoing evaluations of pain management strategies are critical to mitigating the risk of OUD and its associated complications.

Building on these insights, the (Baumann et al., 2023) article by Livia Baumann et al. delves deeper into the risk factors associated with the development of OUD in patients experiencing acute pain. The authors argue that the use of long-acting opioids should be approached with caution due to their potential to heighten dependency risks. They identify several patient-related factors, including a history of mental illness and prior substance use, that significantly elevate the likelihood of developing OUD. Furthermore, the study underscores the correlation between higher opioid doses and prolonged usage beyond initial prescriptions, which can exacerbate dependency issues. Baumann et al. advocate for comprehensive pain management approaches that prioritize psychosocial interventions alongside pharmacological treatments to effectively address and prevent OUD in patients undergoing treatment for acute pain.

Together, these articles underscore the critical need for healthcare providers to remain vigilant in assessing and managing opioid use among patients hospitalized for acute pancreatitis. By identifying risk factors and implementing tailored pain management strategies, the healthcare community can work towards reducing the

Downloaded from The Medical Journal of Surgery and Anaesthesiology
Copyright © International Medical Journal Corp. Ltd. All rights reserved

prevalence of opioid misuse and its associated complications in this vulnerable population.

LITERATURE REVIEW

The article titled "Predictors, rates, and trends of opioid use disorder among patients hospitalized with chronic pancreatitis" by (Charles Adejumo et al., 2021) presents a critical examination of the factors contributing to opioid use among patients with chronic pancreatitis. The authors emphasize the importance of screening for current opioid misuse and identifying associated risk factors, particularly as they relate to managing pain in this patient population.

The article highlights that patients with chronic pancreatitis often experience significant pain, which may lead to increased opioid prescriptions. This situation raises concerns regarding the potential development of opioid use disorder (OUD) among these patients. (Charles Adejumo et al., 2021) systematically review existing literature to identify predictors of opioid misuse, illustrating the necessity for healthcare providers to be vigilant in assessing both the pain management needs and the risk factors for OUD in these individuals.

A key insight from the article is the multifaceted nature of opioid use in chronic pancreatitis patients. The authors note that demographic factors, such as age and socioeconomic status, alongside clinical factors like the severity of pancreatitis and history of substance use, play a significant role in predicting opioid misuse. This comprehensive approach to understanding opioid use disorder not only underscores the complexity of managing pain in chronic pancreatitis but also serves as a call to action for healthcare systems to implement more rigorous screening protocols.

Furthermore, the article discusses the implications of the opioid epidemic on patient care, particularly in relation to chronic pain management. The authors reference the increasing rates of opioid prescriptions and the subsequent rise in OUD, which is a critical public health concern. By linking these trends to the specific context of

Downloaded from The Medical Journal of Surgery and Anaesthesiology
Copyright © International Medical Journal Corp. Ltd. All rights reserved

chronic pancreatitis, the article provides a nuanced perspective that is essential for clinicians managing such patients.

The literature review presented by (Charles Adejumo et al., 2021) is thorough, yet it could benefit from a deeper exploration of alternative pain management strategies that may mitigate the risks associated with opioid use. While the authors effectively highlight the need for careful screening and monitoring, a discussion on non-opioid pain management options would enhance the article's contribution to the field.

The article "Acute Pain and Development of Opioid Use Disorder: Patient Risk Factors" by (Baumann et al., 2023) provides a comprehensive analysis of the factors associated with opioid use among patients hospitalized for acute pancreatitis, with a particular focus on the development of opioid use disorder (OUD). The authors emphasize the importance of cautious opioid prescribing practices, particularly regarding long-acting opioids, which are associated with an increased risk of dependency. This insight is critical in the context of managing acute pain in patients with pancreatitis, as inappropriate opioid use can lead to significant long-term consequences.

One of the key findings of the study is the correlation between the duration and dosage of opioid prescriptions and the risk of developing OUD. The authors note that patients frequently consume higher doses and for longer periods than initially prescribed, which underscores the need for careful monitoring and adjustment of pain management strategies. The article highlights that patients who use their own prescriptions are at a greater risk for OUD compared to those who acquire opioids through illegal means or from acquaintances, suggesting that self-medication practices may contribute to dependency issues ((Baumann et al., 2023)).

Furthermore, the article identifies several patient-related risk factors for OUD, including a history of mental health disorders such as anxiety and depression. This association is particularly relevant in the context of acute pancreatitis, where psychological distress may exacerbate pain perception and lead to increased opioid consumption. The presence of preexisting substance use, including the use of anti-

Downloaded from The Medical Journal of Surgery and Anaesthesiology
Copyright © International Medical Journal Corp. Ltd. All rights reserved

depressants, benzodiazepines, and recreational drugs, further elevates the risk of developing OUD ((Baumann et al., 2023)). This finding emphasizes the necessity for healthcare providers to conduct thorough assessments of patients' mental health and substance use histories when formulating pain management plans.

The authors advocate for a multifaceted approach to managing acute pain that incorporates psychosocial behavioral interventions alongside pharmacological treatments. They recommend the use of medications such as naloxone for acute overdose situations and methadone or buprenorphine for long-term addiction management. This holistic perspective is essential for preventing OUD in patients undergoing treatment for acute pancreatitis, as it addresses both the immediate pain relief needs and the long-term implications of opioid use.

CONCLUSION

The literature review on opioid use in patients hospitalized for acute pancreatitis reveals significant insights into the factors that contribute to opioid utilization and the associated risks of opioid use disorder (OUD). The studies by (Charles Adejumo et al., 2021) and (Baumann et al., 2023) provide a comprehensive examination of the predictors and trends of opioid use, emphasizing the critical need for healthcare providers to implement effective pain management strategies tailored to this vulnerable population.

(Charles Adejumo et al., 2021) highlight the importance of screening for current opioid misuse and identifying risk factors that complicate treatment, such as chronic pain and comorbidities. Their findings indicate a troubling trend of increased opioid prescriptions among patients with chronic pancreatitis, which raises concerns about the potential for developing OUD. They systematically review existing literature to underline the necessity for vigilant assessment of both pain management needs and risk factors for OUD, stressing that demographic and clinical factors significantly influence opioid misuse.

Downloaded from The Medical Journal of Surgery and Anaesthesiology
Copyright © International Medical Journal Corp. Ltd. All rights reserved

Building on this foundation, (Baumann et al., 2023) delve into specific patient-related factors that elevate the risk of OUD, such as a history of mental illness and prior substance use. Their analysis reveals a direct correlation between higher opioid doses, prolonged usage, and the likelihood of developing OUD. They advocate for a comprehensive approach to pain management that integrates psychosocial interventions alongside pharmacological treatments, thereby addressing the multifaceted nature of opioid dependency.

In conclusion, the literature underscores the pressing need for healthcare providers to adopt a proactive stance in assessing and managing opioid use among patients hospitalized for acute pancreatitis. By identifying risk factors and implementing holistic pain management strategies, the healthcare community can mitigate the prevalence of opioid misuse and its associated complications. The integration of both pharmacological and psychosocial approaches is essential to ensure effective pain management while minimizing the risk of developing OUD in this patient population.

DISCLOSURE STATEMENT

- Disclosure Statement : The authors have no conflicts of Interest to declare
- Funding Sources : None
- Acknowledgements : -
- Author Contribution : All authors discussed and contributed the final content for journal submission and publication

REFERENCES

1. Charles Adejumo, A., Akanbi, O., Alayo, Q., Ejigah, V., Egbuna Onyeakusi, N., Faith Omede, O., Pani, L., & Omole, O., 2021. Predictors, rates, and trends of opioid use disorder among patients hospitalized with chronic pancreatitis. ncbi.nlm.nih.gov

Downloaded from The Medical Journal of Surgery and Anaesthesiology
Copyright © International Medical Journal Corp. Ltd. All rights reserved

2. Baumann, L., Bello, C., Mark Georg, F., D. Urman, R., M. Luedi, M., & Andereggen, L., 2023. Acute Pain and Development of Opioid Use Disorder: Patient Risk Factors. ncbi.nlm.nih.gov

Downloaded from The Medical Journal of Surgery and Anaesthesiology
Copyright © International Medical Journal Corp. Ltd. All rights reserved