Prescription analgesic use among young adults: Adherence to physician instructions and diversion

MAJOR FINDINGS:

In this study of 192 young adults (ages 21-26) who were prescribed an analgesic (pain medication), many reported that they used it in a way that was inconsistent with their doctor’s instructions. Specifically, 27% under-used their medication, meaning they took less than their prescribed dose, and 16% over-used it, meaning they took more than their prescribed dose. The remaining 58% were adherent, meaning they followed their physician’s instructions.

Twenty-seven percent diverted their pain medication, meaning they gave it to someone else who wanted to use it nonmedically. “Over-users” were eight times more likely to divert than “under-users,” and almost five times more likely than adherent users, the researchers report in the journal *Pain Medicine*.

The findings help health professionals and parents understand more about the diversion of prescription pain medications. More research is needed to understand why some individuals have enough medication to both over-use and divert. The researchers call for more attention to understanding what young adults do with their unused doses and how health care providers managing acute pain (e.g., physicians and dentists) might be able to help deter diversion through judicious dosing practices.

**Figure 1. Diversion of prescription pain medications by adherence grouping among young adults prescribed a pain medication in the past year (n=192)**
Practice and Policy Suggestions: “The research underscores the importance of ‘judicious dosing’ for managing acute pain conditions similar, to what has been advised for chronic pain management,” said Amelia M. Arria, Ph.D., lead author of the study. Non-opioid pain medications are the preferred first choice because they have lower abuse potential than opioid pain medications. “When young people are prescribed an opioid pain medication, parents should initiate a conversation with them and/or with their doctor about the dangers of diverting the medication,” Dr. Arria said. More research is needed, particularly around prescription adherence, including history of adherence, number of pills prescribed for various conditions, and patient attitudes toward diversion. “Doctors and dentists need an easy tool to use when prescribing opioid pain medications, which includes a few questions and talking points about medication diversion,” Dr. Arria said. Specific prescribing guidelines for dentists, who write prescriptions for pain medications for tooth extractions, and for orthopedic surgeons, who write them for sports injuries, might be useful.


About the College Life Study (CLS)

The CLS is a longitudinal study of 1,253 college students at a large, public, mid-Atlantic university. This study is one of the first large-scale scientific investigations that aims to discover the impact of health-related behaviors during the college experience. Any first time, first-year student between 17 and 19 years old at the university in the fall of 2004 was eligible to participate in a screening survey. The researchers then selected students to participate in the longitudinal study, which consisted of two-hour personal interviews administered annually, beginning with their first year of college. A full description of the methods used is available.¹ Inherent to all self-reporting research methods is the possibility for response bias. Because the sample is from one large university, the ability to generalize the findings elsewhere is uncertain. However, response rates have been excellent and attrition bias has been minimal.

For more information about the study, please visit [www.cls.umd.edu](http://www.cls.umd.edu) or contact Amelia M. Arria at the University of Maryland School of Public Health at aarria@umd.edu.


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