Data on the Diversion, Nonmedical Use and Adverse Outcomes Associated with Pharmaceutical Opioids

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Tables 1.3. Categorization of Data Sources Regarding Nonmedical Use, Diversion, and Adverse Outcomes

<table>
<thead>
<tr>
<th>NONMEDICAL USE</th>
<th>Multisite</th>
<th>Single-Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability of Non-Prescription Use among Non-Patients</td>
<td>DAWN [9], [10], [13]</td>
<td>ORAMED [9], [10], [13]</td>
</tr>
<tr>
<td>Prevalence of Opioid Use among Non-Patients</td>
<td>DAWN [9], [10], [13]</td>
<td>ORAMED [9], [10], [13]</td>
</tr>
</tbody>
</table>

Method

A list of keywords associated with diversion, nonmedical use, and adverse outcomes of pharmaceutical opioid use generated 94 peer-reviewed articles and a number of government and non-governmental sources. All sources were in English, contained quantitative data, and were published between January 1995 and April 2012. A list of 20 topics was developed independently by two researchers and differences were resolved through discussion. Sources were grouped by topic and categorized according to the scale they were collected.

Results

The configuration of data indicates the diverse array of information currently available on the nonmedical use of pharmaceutical opioids in the US. Data appear relatively sparse regarding nonmedical polydrug use, availability of opioids via the black market, and mechanisms of opioid diversion, such as doctor shopping and forgery.

Conclusion

This index serves as a reference for researchers and policymakers who seek to further our understanding of the public health problems associated with pharmaceutical opioids and anesthetoid associated adverse outcomes. Outlining the array of available data provides a global perspective and identifies topics that contain more and less quantitative information to guide our understanding and inform future research directions for the pharmaceutical opioid system in the US.

References

see more at http://www.pdx.edu/sysc/opioid-data-sources

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