



Research Article

Kentucky pharmacists' experiences in dispensing abuse-deterrent opioid analgesics

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Abstract

Background

Despite pharmaceutical industry promise and enthusiasm, abuse-deterrent formulation (ADF) opioid use is relatively low. While some barriers to use have been addressed through state laws and policy, pharmacists' experiences with and opinions of ADF opioids are unclear.

Objectives

The objective of this study was to evaluate pharmacists' perceptions of dispensing ADFs.

Methods

This was a cross-sectional survey of community pharmacists licensed and practicing in Kentucky conducted in late 2019. The survey asked about perception, experience dispensing, and insurance coverage of 5 ADF opioids available at the time.

Results

Most respondents (421/629, 67.9%) were familiar or very familiar with ADFs, and 63.1% agreed that all opioids should meet U.S. Food and Drug Administration standards for abuse deterrence. Aside from OxyContin, most ADF opioid formulations were not stocked (range: 46.7%-73.6%). Third-party payer claims were occasionally or almost always rejected for most ADFs (range: 56.3%-75.4%). Contrary to intended mechanism of deterrence, ADFs were rated as the least effective strategy to reduce opioid misuse/abuse, with over half (51.2%) of respondents believing ADFs were not effective or somewhat effective. ADFs were rated as effective or very effective at reducing opioid abuse by swallowing intact by 37.4% of respondents.

Conclusion

Pharmacists are familiar with ADFs but do not dispense them frequently. Pharmacists appear skeptical about the effectiveness of ADFs but support policies that could increase ADF uptake.

Key Points