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Background

Prescription drug abuse and diversion are growing concerns as the US Centers for Disease Control and Prevention (CDC) estimated in 2010 that roughly 12 million Americans (age 12 or older) reported nonmedical use of prescription painkillers since 2009. Further there were almost 500,000 emergency department visits and approximately 15,000 deaths annually attributed to prescription painkiller overdose.¹

In 2010, there were 7,238 reported admissions to state-licensed or certified substance abuse programs secondary to prescription painkillers in New Jersey, an increase of over 5,000 since 2005.² To help combat this mounting epidemic, the CDC recommends the implementation of state-run prescription monitoring programs (PMPs) to collect data on prescribing and dispensing of controlled substances.³

Forty-nine states have enacted legislation for PMP implementation.⁴ The New Jersey Division of Consumer Affairs-run PMP, which can be accessed by pharmacists and prescribers in good standing with their respective licensing boards, monitors data on controlled dangerous substances (Schedules II-V) and Human Growth Hormone dispensed in outpatient settings in New Jersey, and by out-of-state pharmacies dispensing into New Jersey.²

To our knowledge, little has been published⁵⁻⁷ on pharmacists' use and opinions of PMPs, particularly in New Jersey where the operational program launched in 2012.

Objective

The primary objective is to evaluate New Jersey outpatient pharmacists' knowledge and perceptions of the New Jersey Prescription Monitoring Program (NJMPMP) and capture commentary related to access, barriers to use, and applicability to clinical practice.

Methods

- Cross-sectional study of New Jersey pharmacists practicing in outpatient settings
- Total of 495 licensed pharmacists who served as experiential rotation preceptors for Ernest Mario School of Pharmacy were contacted via e-mail and invited to participate in a voluntary and anonymous online survey
- Submitted to Institutional Review Board and granted exemption
- Adaptive design survey contained 1-17 items utilizing SurveyMonkey® to collect descriptive data
- Six-week survey period from September 2013 – October 2013
- Inclusion criteria: 1) pharmacists practicing in New Jersey; 2) pharmacists practicing in community pharmacy, mail order, and hospital/clinic outpatient settings; 3) subjects provide consent and agree to take the survey
- Exclusion criteria: 1) pharmacists not licensed and/or practicing in New Jersey; 2) pharmacists practicing in inpatient settings, pharmaceutical industry, or who are not subject to NJMPMP reporting requirements

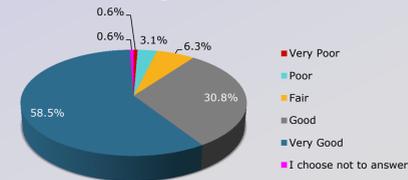
Results

Demographics

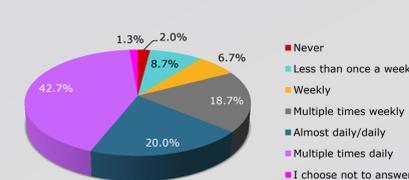
- Overall response rate = 36% (n=180); 163 met inclusion criteria; 150 were registered to use the NJMPMP
 - >50% of respondents have practiced in New Jersey ≥20 years; >75% practiced ≥ 10 years; <9% have been practicing <5 years
 - Top three reported practice areas: chain/mass merchandiser (55%), grocery store (22%), independent (19%)
 - >99% were familiar with the NJMPMP, with the majority attributing this to the NJ Board of Pharmacy Newsletter and/or their employers

Frequent Users of the NJMPMP (n=124)

How would you rate your overall knowledge of the NJMPMP?

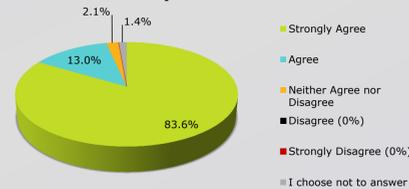


On average, how often do you access the NJMPMP database?

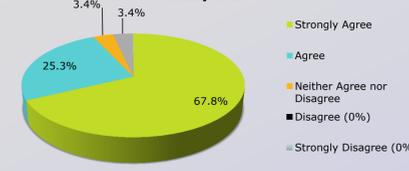


- Which of the following serve as triggers for you to use the NJMPMP database? (5 most frequent responses)
 - Feeling of uneasiness (73.3%)
 - Patient is new to my pharmacy (72.6%)
 - Class of medication (71.2%)
 - Patient is paying out-of-pocket (70.6%)
 - Prescription has suspicious features (65.1%)

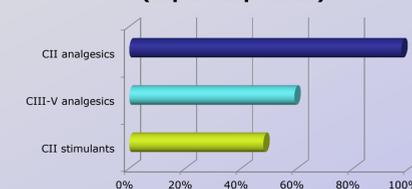
I would not dispense a prescription if the NJMPMP indicates potential misuse



If the NJMPMP indicates potential misuse, I would call the prescriber to verify & notify him/her



For what categories of prescriptions do you access the NJMPMP? (top 3 responses)



- Additional features respondents would like implemented in the NJMPMP include (top 3 responses):
 - Reportable data linked to bordering states (77.4%)
 - Reportable data provided in real-time (71.2%)
 - Reportable data linked nationwide (68.5%)

- >97% of respondents either "Strongly Agree" or "Agree" the NJMPMP is useful in helping to reduce the risk of misuse/abuse of controlled substances
- >82% of respondents either "Strongly Agree" or "Agree" the NJMPMP has made them more alert to appropriate dispensing of controlled substances

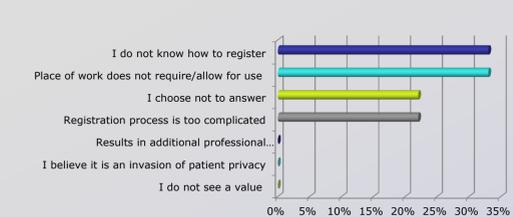
Infrequent Users of the NJMPMP (n=16)

- >29% of respondents reported accessing the database as "Never" or "Less than once a week" because they did not believe it applies to their patient population; >17% believe they are too busy at work to utilize more frequently

Results (continued)

Non-Registrants of the NJMPMP (n=9)

I am not registered to use the NJMPMP database because (select all that apply):



I would be more likely to use the NJMPMP if the program had the following features (top 2 responses):

- Easier registration procedure (55.6%)
- Easier to use the database (33.3%)

Free Response (n=31)

- Noticeable trends suggesting the benefits of the NJMPMP:
 - Very helpful in assessing patterns of medication use
 - Used as a validation tool to confirm medication history with new patients
- The most commonly suggested areas for improvement include:
 - Use of a real-time system that connects with bordering states' programs
 - Mandatory use for all pharmacists and prescribers; instantaneous data submission
 - Greater physician utilization for increased collaboration with pharmacists

Discussion and Conclusions

- This study was limited by inherent response bias and a study population limited only to outpatient pharmacists who serve as preceptors for Rutgers University Ernest Mario School of Pharmacy.
- The results of the study indicate that a significant number of New Jersey outpatient pharmacists are aware of, and are using, the NJMPMP frequently in practice.
- Despite positive feedback, several features of the NJMPMP could be improved, including: increased prescriber use, regional interconnectivity of data, and a real-time data system.
- Future studies should investigate prescribers' use, perceptions, and challenges with the program.
- Research should also give consideration to how prescribers' and pharmacists' overall use of the NJMPMP affects patient care and promotes collaboration for the benefit of patient safety.

References

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7. *J Am Pharm Assoc.* 2014;54:e5-e15.