

Preventing prescription drug abuse: Make it LAST

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edications that psychiatrists routinely prescribe—such as benzodiazepines for anxiety and psychostimulants for attention-deficit/hyperactivity disorder—often are diverted and abused. In 2011, 6.1 million Americans age ≥12 abused prescription drugs.¹

The mnemonic LAST can bring to mind 4 clinical "red flags" that can assist you in determining whether prescription abuse or diversion is occurring. Incorporating these 4 warning signs in your clinical assessment and medication reviews will make it easier for you to detect when medications are not being taken as prescribed.

Lost or stolen prescriptions. Patients who want to obtain a new or replacement prescription may claim that their medication was lost or stolen. Although this can occur, the prescriber should be suspicious if this becomes a recurrent situation. Some clinicians require patients to produce a filed police report for stolen medications before they will consider writing a new prescription.

Alternating medications/providers. Patients may obtain similar medications from multiple providers. Prescription Drug Monitoring Programs (PDMPs), which are databases that allow physicians to track where patients are getting their prescriptions, may help prevent this. According to the Alliance of States with Prescription Monitoring Programs, as of January 2010, 48 states had instituted PDMPs or passed legislation to implement them.²

Specific medication. Patients may have an allergy or respond better to a particular drug; however, be cautious when a patient refuses to consider an alternate medication or claims he or she has taken a specific medication without a prescription and it was the only thing that worked for them.

Dime between prescriptions. Patients may get a prescription for a medication, then shortly after their visit claim the medication doesn't work and request a second prescription for a similar medication. One way to address this is to require the patient to return the unused portion of the first medication before writing a new prescription. A patient also may complain that they have to come to your office too frequently and ask for multiple refills of medication, which would decrease your ability to monitor his or her response to treatment.

A patient who meets ≥1 of the above criteria could be a higher risk for prescription drug abuse or diversion. Documenting these findings and talking with the patient could help justify the need to switch to a medication with a lower abuse potential or possibly referral to a drug treatment program.

In a 2009 survey, 56% of teens stated that prescription medications were easier to obtain than illicit drugs.³ Medications such as benzodiazepines and stimulants can be beneficial to patients, but because of their abuse potential, they may be underprescribed. Be vigilant when prescribing these medications, and monitor patients carefully to ensure that they are taking all medications as directed.

References

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Disclosure

Dr. Wiley reports no financial relationship with any company whose products are mentioned in this article or with manufacturers of competing products.



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