A Pilot Randomized Clinical Trial of an Intervention to Reduce Overdose Risk Behaviors Among Emergency Department Patients at Risk for Prescription Opioid Overdose

Purpose

The purpose of this study was to examine the impact of a motivational interviewing-inspired intervention to reduce opioid misuse and overdose risk behaviors among participants who reported prescription opioid misuse.

Background

Between 1999 and 2009, the rate of prescription opioid overdose deaths increased by 293% in the U.S. (Calcaterra et al., 2013). Prescription opioid overdose is a national concern, yet there is a dearth of interventions designed to prevent or reduce opioid overdose risk behaviors.

Methods

Using a two-group parallel trial design, this study compared overdose risk behaviors and non-medical prescription opioid use among patients aged 18 to 60 seeking care at the University of Michigan Health System emergency department between April 2013 and March 2014. To determine eligibility for the trial, participants completed a brief computerized screen. Those who self-reported non-medical use of prescription opioids in the prior three months were asked to complete a baseline survey and were then randomized to one of two conditions: 1) a motivational intervention delivered by a therapist plus enhanced usual care (EUC) or, 2) EUC only (i.e., control condition). A follow-up assessment occurred six months later.

Key Findings

- Participants in the intervention group reported a significantly greater reduction in the frequency of overdose risk behaviors at the six month follow-up assessment compared to participants in the EUC only group.
  > 40.5% reduction in mean level vs. 14.7%
- Participants in the intervention group reported significantly greater reductions in non-medical use of prescription opioids at the six month follow-up assessment compared to participants in the EUC only group.
  > 50.0% reduction in mean level vs. 39.5%

Implications

This is the first clinical trial of a behavioral intervention designed to reduce overdose risk behaviors. Findings suggest this therapist-delivered motivational intervention reduced overdose risk behaviors and non-medical use of prescription opioids among adults at risk for prescription opioid overdose seeking care in the emergency department.

Citation
