

# **Osteoarthritis of the knee clinical care standard indicators: 5c-Proportion of patients prescribed opioids for longer than three months for the management of pain associated with knee osteoarthritis**

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# Osteoarthritis of the knee clinical care standard indicators: 5c-Proportion of patients prescribed opioids for longer than three months for the management of pain associated with knee osteoarthritis

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Indicator
<b>Short name:</b>	Indicator 5c-Proportion of patients prescribed opioids for longer than three months for the management of pain associated with knee osteoarthritis
<b>METEOR identifier:</b>	644310
<b>Registration status:</b>	<a href="#">Health</a> , Standard 02/08/2017
<b>Description:</b>	Proportion of patients prescribed opioids for longer than three months for the management of pain associated with knee <a href="#">osteoarthritis</a> .
<b>Rationale:</b>	Opioids are associated with adverse events (including dependence), which are sometimes very serious (Nuesch et al. 2009). There are additional risks for older people, where the increased likelihood of a fall with opioid use can lead to serious fractures.
<b>Indicator set:</b>	<a href="#">Clinical care standard indicators: osteoarthritis of the knee</a> <a href="#">Health</a> , Standard 02/08/2017

## Collection and usage attributes

<b>Population group age from:</b>	45 years
<b>Computation description:</b>	Presented as a percentage.  Health services determine the number of patients prescribed opioids for longer than three months through an audit of all the patients with knee osteoarthritis at a particular point in time.
<b>Computation:</b>	$(\text{Numerator} \div \text{denominator}) \times 100$
<b>Numerator:</b>	Number of patients prescribed opioids for longer than three months for the management of pain associated with knee osteoarthritis.
<b>Denominator:</b>	Number of patients with knee osteoarthritis prescribed opioids.
<b>Comments:</b>	<p>If opioids are used, they should be prescribed on a short-term basis, with regular review of treatment response and adverse effects.</p> <p>A clear plan for ceasing ineffective therapy should be in place and discussed with the patient. If treatment response is inadequate, caution should be exercised when increasing the dose of opioids as there is an increased risk of harm and potentially no added benefit.</p> <p>Prolonged use of opioids indicates the need for specialist assessment.</p> <p>Note that health services may not necessarily achieve 0% for this indicator, even when providing appropriate treatment, as there may be patients for whom opioids are the most appropriate drug for longer than three months. In these instances, this indicator should be used to review the appropriateness of the use of opioids for longer than three months for these patients, and to monitor the health service's level of use of opioids over time.</p>

## Representational attributes

**Representation class:** Percentage  
**Data type:** Real  
**Unit of measure:** Service event  
**Format:** N[NN]

## Accountability attributes

**Other issues caveats:** Applicable setting: primary and specialist care (including hospital-based specialist care).

## Source and reference attributes

**Submitting organisation:** Australian Commission on Safety and Quality in Health Care  
**Reference documents:** Nuesch E, Rutjes AW, Husni E, Welch V & Juni P 2009. Oral or transdermal opioids for osteoarthritis of the knee or hip. Cochrane Database of Systematic Reviews(4): CD003115.