

Opioid Prescribing and Opioid Abuse Among African American Females

Introduction

We sought to explore research that studied opioid prescribing and related opioid abuse amongst African American and Caucasian females ages 17-40.

We hope to determine the strength of evidence of racial disparity between the groups, the likelihood of developing opioid use disorder from prescription opioids, assess/analyze findings, and evaluate how the evidence may be implemented into clinical practice.

Design/Sample

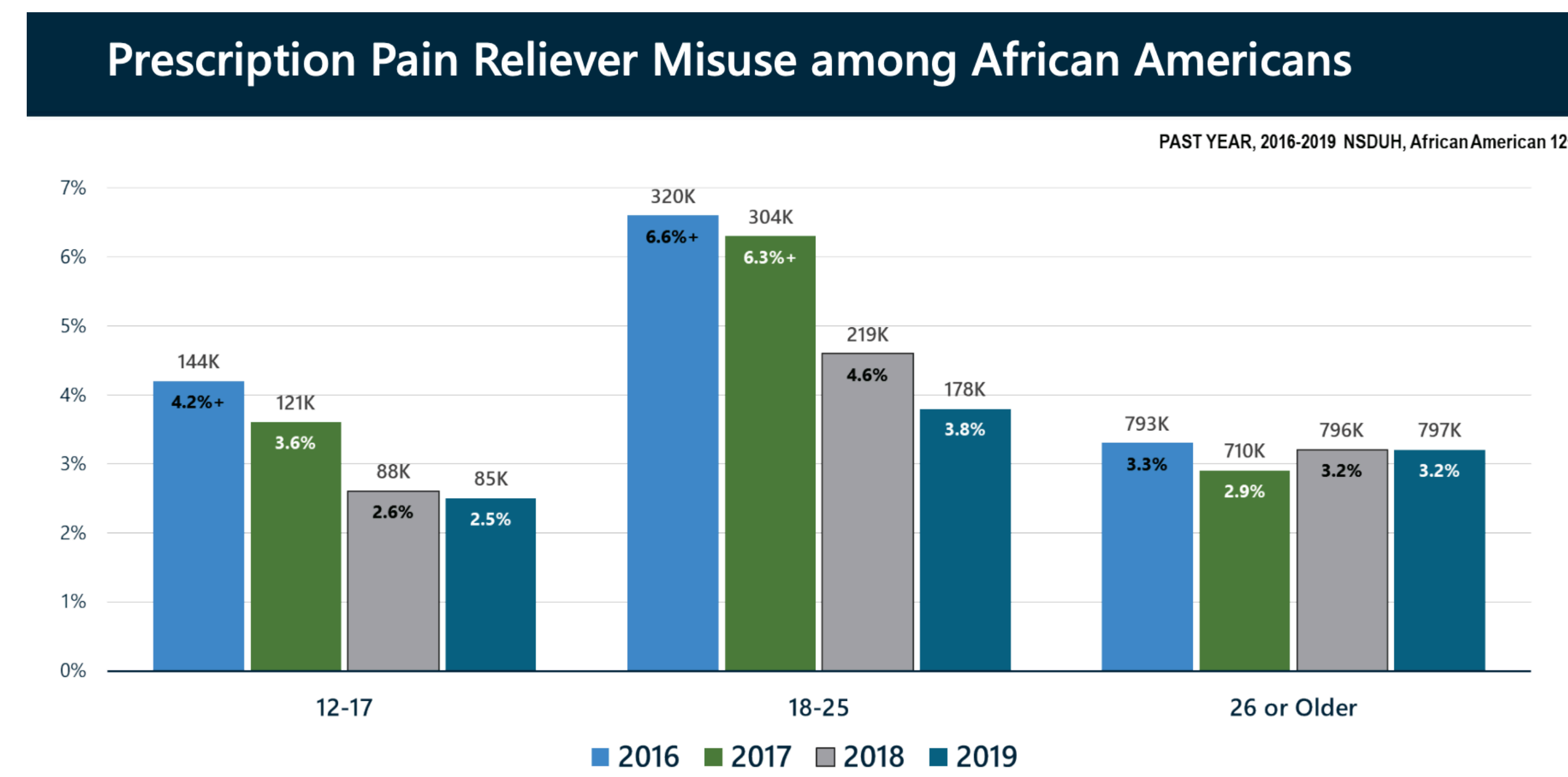
The design of the studies included literature review, and comparison and cross-sectional studies. Samples included African American men and women, and other ethnicities used for comparison. Subjects were 18 years of age and older. Data included prescribed vs. non prescribed use of opioids, along with social and medical use of opioids.

Analysis

- Articles analyzed: 12
 - Categories:** Cross-sectional: 6, Cohort: 2, Random Control trial:1, Commentary: 1, Expert opinion: 1
- From the articles:
- There was no consensus as to whether there is a racial difference in prescribing opioids for pain.
- Articles reviewed found no difference in the risk of AA individuals developing an OUD between those living in rural versus urban areas.
- AA are less likely to report opioid misuse (OUD).
- For those with OUD, AA individuals are less likely to receive treatment for it than their white counterparts.

Results

- The current rise in opioid misuse and overdose deaths among African Americans is related to excessive prescribing and use of prescription opioids.
- African Americans are less likely than Caucasians to be prescribed opioids and medications for opioid use disorder.
- African American women and Caucasian women report prescription opioid misuse at nearly equivalent rates.
- African American women are less likely to have a diagnosis of opioid use disorder than Caucasian women.



Conclusions/Further Study

Our research found an overall disparity between Caucasian and African American opioid use and opioid use disorder treatment. We could not determine the differences in which opioids were prescribed for our specific patient demographics. More research needs to be conducted in the rate of opioid prescribing and the further development of opioid use disorder from prescribed opioids.

