

Counting the cost of over-the-counter codeine misuse:

A retrospective review of hospital admissions



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Should low-dose codeine analgesics be available over-the-counter?

- Questionable efficacy vs. documented harm secondary to codeine dependence
- Advisory Committee on Medicines Scheduling recommended up-scheduling to prescription only Oct 2015
- One argument made against the change – increased cost to health care system due to increased GP visits to obtain these analgesics

1) Identify & describe hospital admissions resulting from misuse of over-the-counter combination analgesics containing codeine

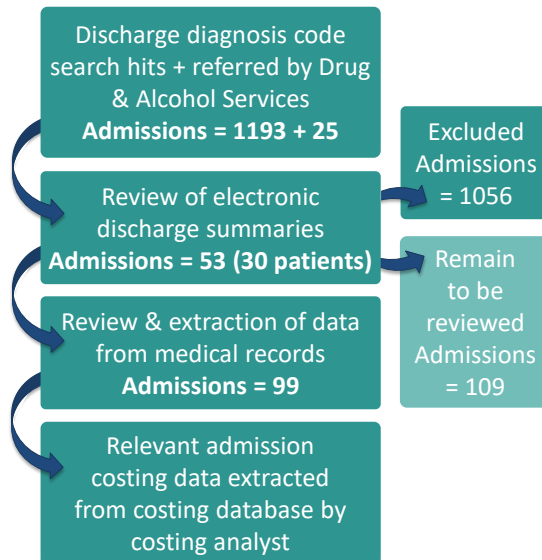
2) Evaluate the economic costs to the health care system associated with these admissions

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Data collection

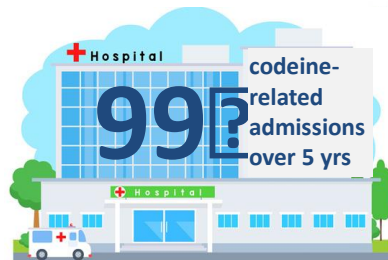
Conducted search of discharge diagnoses from tertiary teaching hospital from Jun 2010 - Jun 2015

Search included diagnoses related to known sequelae of codeine, paracetamol &/or non-steroidal anti-inflammatory drug overuse

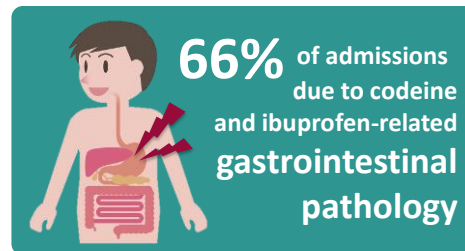
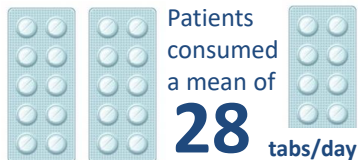


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Codeine-related admission characteristics



Mean length of stay 5.9 days



83% of patients were female.
Average age was **36** yrs

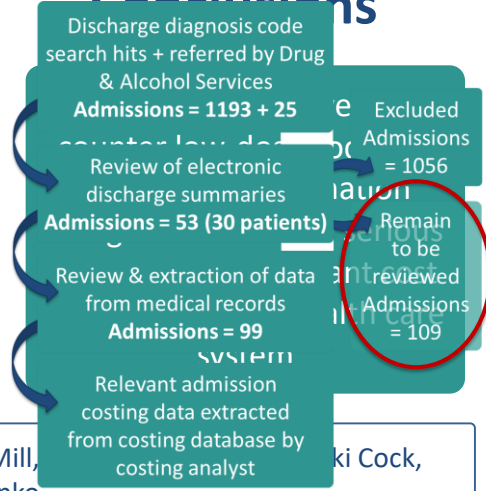


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Costs

- Total cost for 99 admissions = **\$1,008,082**
- Mean cost per admission = **\$10,183**
- Likely underestimate
- Preventable, funds better spent elsewhere

Conclusions



Acknowledgements: Deanna Mill, Emily Monaghan, Steve Tarasenko, Ki Cock,