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Adequacy of essential opioid analgesic consumption for pain and perioperative care across 137 countries from 2017 to 2021

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	Introduction	Conclusion
•	 Previous studies have quantified the opioid analgesic consumption using various sources till 2019. Consumption does not directly notify adequacy. New index based on human development index (HDI) called Adequacy of Opioid Consumption (AOC) Index was proposed. While useful, It does not account for health system factors. We improved the AOC index by adjusting it for physician anesthesia provider (PAP) density. 	 We find that most low-and middle-income countries situated in the Global South lack adequate consumption to essential opioid analgesics. These point to the need for investing in anesthesia workforce and ensuring access to opioid analgesics. Our novel estimates can help inform policies, assist monitoring and evaluation of international programs. Findings are limited by data missingness and inability to account for perioperative disease burden.
	Materials and Methods	Results
D	Data Sources and Variables: Mean essential opioid consumption in mg/capita (2017-21):	

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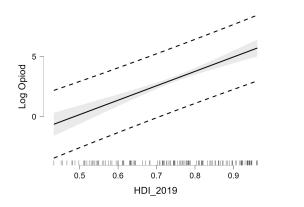
- Mean essential opioid consumption in mg/capita (2017-21): International Narcotics Control Board Annual Report 2022, United Nations year-wise population projections, WHO Model List of Essential Medicines 2023.
- Anesthesia workforce density per 100,000 people (past years):LCoGS data (194 countries; 1999-2014) and WFSA Survey (153 countries; 2015-16).
- Physician density per 100,000 people: Institute for Health Metrics and Evaluation (IHME) (204 countries;1990-2019).
 Human Development Index (HDI): UN Human Development Report 2019.

PAP density Calculations:

 $\frac{PAP}{Physician} Ratio = \frac{2016 PAP density (per 100,000)}{2016 Projected Physician Density (per 100,000)}$

2019 PAP Density (per 100,000) = 2019 Projected Physician Density (per 100,000) * $\frac{PAP}{Physician}$ Ratio

Linear Regression:



- Dependent variables: 2019 PAP density and HDI
- Independent variable: mean essential opioid consumption

Marginal Effect Plot of HDI 2019 on mean essential opioid consumption adjusted for 2019 PAP density

Log(PAP adjusted opioid analgesic consumption values) = X * HDI 2019 + Y * Mean of Log(PAP Density 2019) + C

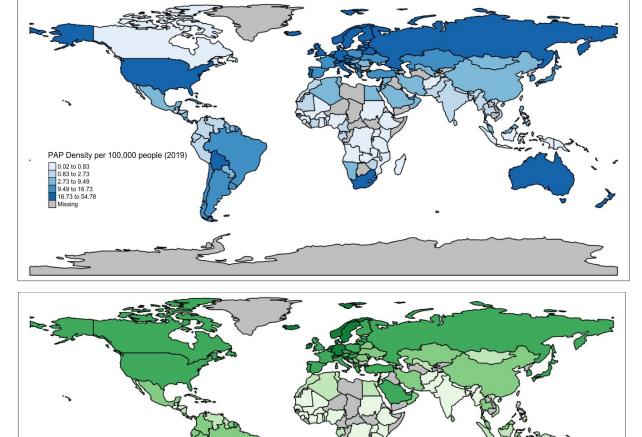
PAP Adjusted Adequacy of Opioid Analgesic Consumption Index Calculation

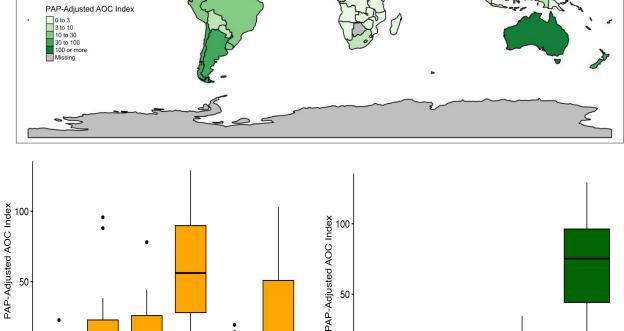
 $PAP \ Adjusted \ AOC \ Threshold = \frac{\sum PAP \ Adjusted \ Opioid \ Consumption \ of \ Top \ 20 \ Countries}{20}$ $PAP \ Adjusted \ AOC \ Index \ (for \ a \ given \ country) = \frac{PAP \ Adjusted \ Opioid \ Consumption \ (of \ a \ given \ country)}{PAP \ Adjusted \ AOC \ Threshold} \ * \ 100$

 PAP-adjusted AOC index classified as High (AOC >100), moderate (< 100 and >30), low (< 30 and >10), very low (< 10 and >3), and extremely low (< 3)

References

- Duthey B, Scholten W. Adequacy of opioid analgesic consumption at country, global, and regional levels in 2010, its relationship with development level, and changes compared with 2006. J Pain Symptom Manage. 2014;47(2):283-297. doi:10.1016/j.jpainsymman.2013.03.015
- Jayawardana S, Forman R, Johnston-Webber C, et al. Global consumption of prescription opioid analgesics between 2009-2019: a country-level observational study. EClinicalMedicine. 2021;42:101198. doi:10.1016/j.eclinm.2021.101198
- Richards GC, Aronson JK, Mahtani KR, Heneghan C. Global, regional, and national consumption of controlled opioids: a cross-sectional study of 214 countries and non-metropolitan territories. Br J Pain. 2022;16(1):34-40. doi:10.1177/20494637211013052
- Ju C, Wei L, Man KKC, et al. Global, regional, and national trends in opioid analgesic consumption from 2015 to 2019: a longitudinal study. Lancet Public Health. 2022;7(4):e335-e346. doi:10.1016/S2468-2667(22)00013-5
- Scholten WK, Christensen A-E, Olesen AE, Drewes AM. Quantifying the adequacy of opioid analgesic consumption globally: an updated method and early findings. Am J Public Health. 2019;109(1):52-57. doi:10.2105/AJPH.2018.304753
- International Narcotics Control Board. Report of the International Narcotics Control Board for 2022. United Nations; 2023. Web Annex A. World Health Organization Model List of Essential Medicines – 23rd List;2023
- World population prospects—Population division—United nations. (n.d.). Retrieved January 11, 2024, from https://population.un.org/wpp/
- Kempthorne, P., Morriss, W.W., Mellin-Olsen, J., & Gore-Booth, J. (2017). The WFSA global anesthesia workforce survey. Anesthesia & Analgesia, 125(3), 981. https://doi.org/10.1213/ANE.0000000002258







- Five year mean essential opioid analgesic consumption globally was 227.59mg/capita.
- Median PAP density for 2019 estimated to be 5.31 (IQR: 1.29-15.23), ranged from 106.01 (95% UI: 154.15, 73.56) in Niue to 0.02 (95% UI: 0.01, 0.03) in Guinea
- PAP-adjusted AOC threshold was 234.39 mg/capita.
- PAP-adjusted AOC index values ranged from 129.14 for Switzerland to 0.23 for Mali.
- Only 7.3% had a high, 23.36% had moderate and 69.35% Low to Extremely Low AOC
- PAP-adjusted AOC different significant; y across WHO regions and World Bank Income Groups.