Prescription of opioids in Italy: everything, but the morphine

Oral morphine remains the drug of choice for moderate or severe cancer pain and an important indicator of progress in cancer pain management, according to international guidelines and Cochrane systematic reviews [1–4]. The available data on the consumption of opioids, particularly of morphine, in Europe apparently show an inappropriate trend [5, 6]. We studied the trend in morphine and other strong opioids consumption in Italy from 2001 to 2008, by also including the two entries into the Italian market (oral oxycodone and buprenorphine TTS).

Analysis of opioids consumption was carried out by using national data on the prescription of drugs charged to Italian National Health Service (NHS) in 2000–08. Data collection is handled by the national federation of private pharmacies operating within the NHS (Federfarma), which receives the figures from its provincial offices and processes them at a regional level and by the Comunal Pharmacies Association (Assofarm).

The consumption of opioids in the first 9 months of the 2008 grew by 17%, in comparison with the same periods in 2007, confirming the positive trend over the last 8 years. The greatest increase in the use of opioid was for oxycodone (+94%) and, to a lesser extent, for buprenorphine (8%) and fentanyl (5%). Only the consumption of morphine showed a 2% decrease. In the same period, morphine is the active compound with the minor prescription (10.8%), confirming the trend to decrease, initiated in 2005 (Figure 1). After being launched into the market in Italy at the end of 2000, use of transdermal fentanyl has shown a considerable increase, by growing nearly nine times until September 2008 and representing ~51% of the total opioids used (Figure 1). A trend to a progressive increase in consumption of buprenorphine has been recorded only after February 2005, concomitant with the exponential increase of the use of transdermal formulation, immediately after its launch into the market. In September 2006, consumption of buprenorphine exceeded consumption of morphine with 8.0 defined daily dose (DDD)/100 000 inhabitants per day and in the months later the gap between the two opioids prescription trends enlarged (Figure 1). Before that time transdermal buprenorphine constituted <10% of the total consumption of buprenorphine, but in April 2007 it has reached 95%. In 2008, buprenorphine represented 14.2% of the total prescription of opioids (9.8 DDD/100 000 inhabitants per day). In 2005, consumption of oxycodone showed a sharp increase, immediately after its launch into the market, and, finally, exceeded consumption of morphine in March and of buprenorphine in September–October 2007 (Figure 1).

Eight years after the abolition of restrictive prescription regulations [6], opioid prescription behaviour is still largely contrary to guidelines, suggesting that either cultural or marketing rather than legal factors are mainly responsible for the Italian phenomenon of ‘morphinofobia’, among physicians and health care workers. Academic medical education, postgraduate training courses and periodic national surveys on opioid consumption should be implemented to improve the quality of cancer pain management.

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doi:10.1093/annonc/mdp041

Published online 12 March 2009