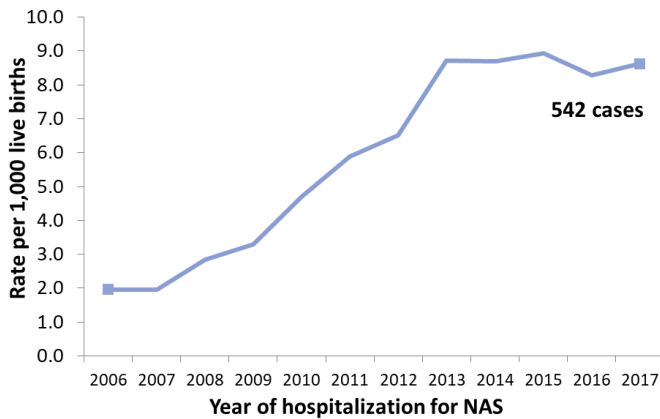




# WOMEN AND OPIOIDS EDUCATION FOR PROVIDERS

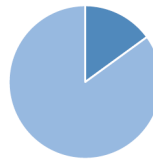
There has been an increased rate of infants born with **Neonatal Abstinence Syndrome (NAS)**.<sup>1</sup>



In addition, women prescribed opioids during pregnancy bear an increased burden of adverse birth outcomes (Wisconsin, 2014-2016<sup>2</sup>):

- **1.3** times more likely to give birth to infants born small for gestational age (SGA);
- **1.4** times more likely to give birth to infants born premature (< 37 weeks); and
- **1.3** times more likely to give birth to babies needing assisted ventilation for more than 6 hours.

Chronic opioid use in pregnancy (including prescription pain medications, maintenance therapy for opioid dependence, and/or illicit use of pain medications or heroin) can increase the risk for pregnancy complications and adverse newborn outcomes.<sup>3</sup>



Research suggests that **85%** of women with opioid use disorder have an unintended pregnancy, compared to 31-47% in the total US population.<sup>4,5</sup>

**28%** of privately insured and **39%** of Medicaid insured women age 15-44 years filled a prescription for an opioid medication between 2008-2012.<sup>6</sup>



VS



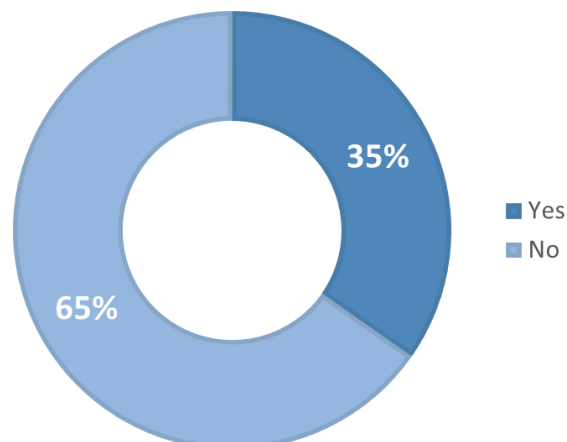
Compared to men, women are more likely to have chronic pain, be given prescription pain medications, are given higher doses, and use these medications for longer periods of time.<sup>7</sup>

## Opioid Use During Pregnancy in Wisconsin

- Between 2005 and 2016, the rate of opioid use disorder more than tripled.<sup>8</sup>
- Between 1999 and 2014, the rate of opioid-impacted deliveries increased from 0.3 to 7.6 per 1000 delivery hospitalizations.<sup>9</sup>
- More than one in every ten (11.4%) women who gave birth had an opioid prescribed at some point during pregnancy (2014-2016).<sup>10</sup>

A recent survey of reproductive-age women prescribed opioid medication in primary care clinics showed that reproductive planning questions are rarely asked in the context of opioid prescribing encounters.<sup>11</sup>

Before receiving your most recent opioid prescription, did your medical provider ask if you are planning to become pregnant within the next year?



## WHAT YOU CAN DO AS A HEALTH CARE PROVIDER

**For any woman of reproductive age who is using opioids (prescribed or illicit), or being considered for opioid pain treatment:**

- Discuss the potential **risks and benefits** of opioid medications.<sup>12</sup>  
Consider **non-opioid alternatives** (both pharmacologic and non-pharmacologic).
- Prescribe and dispense opioids for the **shortest duration** and **lowest effective dose**.
- Ask about **reproductive health goals** as a routine part of opioid prescribing, and counsel about the implications of opioid dependence during pregnancy.
- Provide specific counseling about **effective contraception** if a patient does not want to become pregnant.
- Use a **standardized screening tool** (e.g. Opioid Risk Tool, DAST-10, NIDA Modified ASSIST, SOAPP-R, or 4 P's Plus) to assess for risks of, or current, substance use disorders.
- Ensure a **safe, confidential and nonjudgmental environment** that allows for disclosure of substance use and other sensitive topics.
- Register with and use the **Wisconsin Prescription Drug Monitoring Program** (<https://pdmp.wi.gov/>) to assess for current or past opioid prescription utilization, and potential dangerous medication combinations.
- **Seek expert guidance** if you identify a patient who is pregnant, or interested in becoming pregnant, in order to develop a plan of care that optimizes outcomes for mother and baby. Current recommendations advise **AGAINST** stopping chronic opioids use during pregnancy due to the high risk of pregnancy complications related to withdrawal and risk of relapse to active ongoing addiction.<sup>13</sup>

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## HELPFUL RESOURCES

- Wisconsin Association for Perinatal Care: <https://perinatalweb.org/>
- North Carolina Pregnancy & Opioid Exposure Project: <https://ncpoep.org/>
- CDC Safe Prescribing Tools for Health Care Providers: <https://www.cdc.gov/drugoverdose/prescribing/guideline.html>
- Substance Abuse and Abuse Treatment Locator: <https://www.dhs.wisconsin.gov/opioids/find-treatment.htm>
- Wisconsin Maternal and Child Health Hotline: 1-800-642-7837
- Wisconsin Perinatal Quality Collaborative: <https://wispgc.org/>