Codeine in Pediatrics Post-Tonsillectomy and/or Adenoidectomy at Surrey Memorial Hospital – How Much Are We Using?

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Background

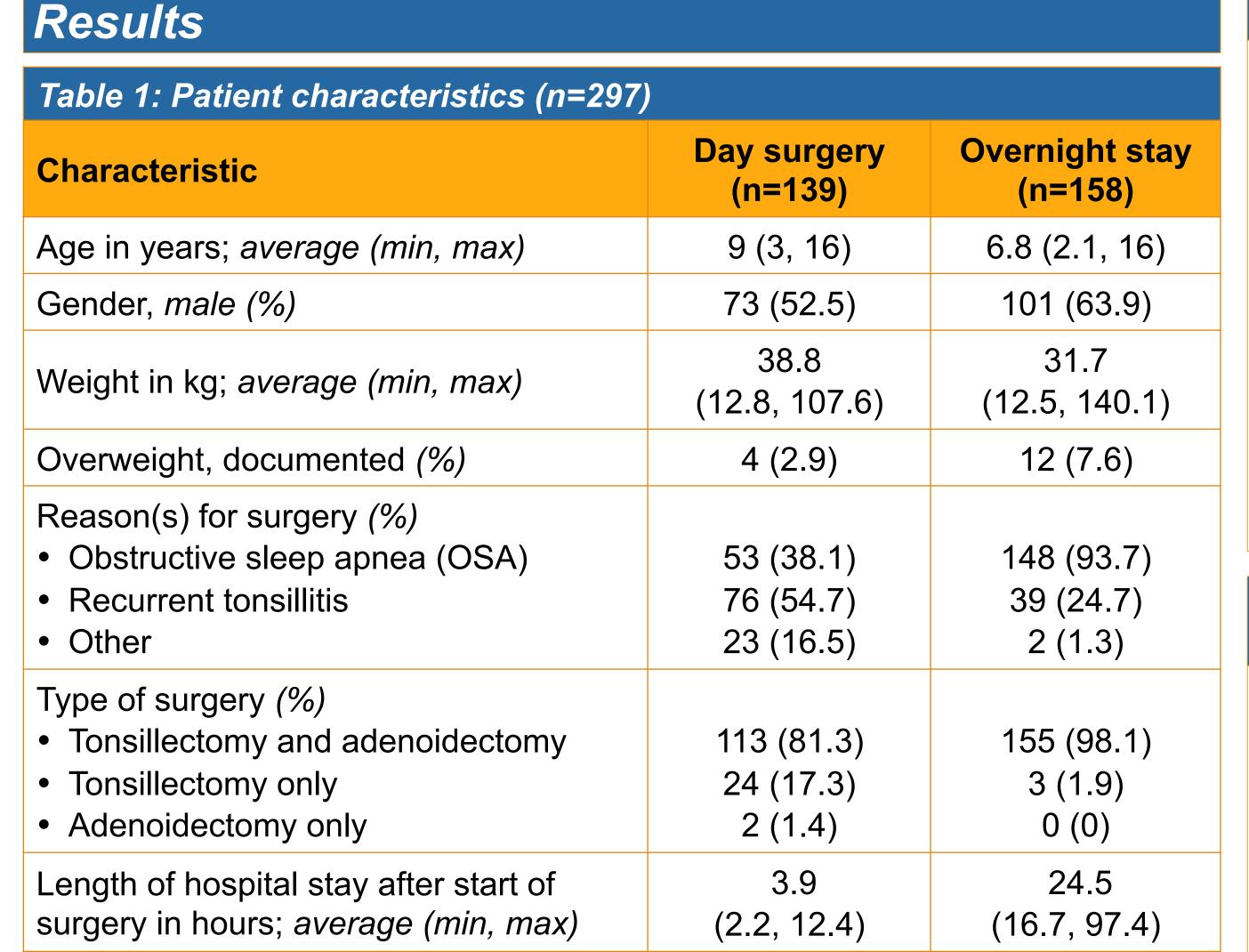
- Tonsillectomy and/or adenoidectomy (T&A) is a common ambulatory surgery performed in children
- Codeine has been used for moderate to severe pain associated with T&A
- Five case reports in children post-T&A who received recommended doses of codeine described serious adverse events including three deaths
- Recommendation from Health Canada, U.S. Food and Drug Administration, and Fraser Health Authority to restrict use of codeine in pediatric patients post-T&A
- Codeine is on the post-T&A pre-printed orders at Surrey Memorial Hospital (SMH)

Objectives

- Determine the proportion of patients with orders for codeine post-T&A within the hospital and for discharge
- Determine the proportion of patients who actually received a dose of codeine while in hospital
- Identify patient-specific or prescribing factors leading to codeine use
- Determine what other analgesic or combination of analgesics are prescribed at SMH instead of codeine
- Determine the level of pain experienced in hospital for patients who have had a T&A as indicated by pain rating scales

Methods

- Chart review
- Sample size of convenience
- Inclusion:
- Pediatric patients who had a T&A at SMH
- May 1, 2012 to April 30, 2013
- Exclusion:
- Neonates (<45 weeks post-menstrual age)
- Patients ≥ 17 years
- Statistical analysis using descriptive statistics





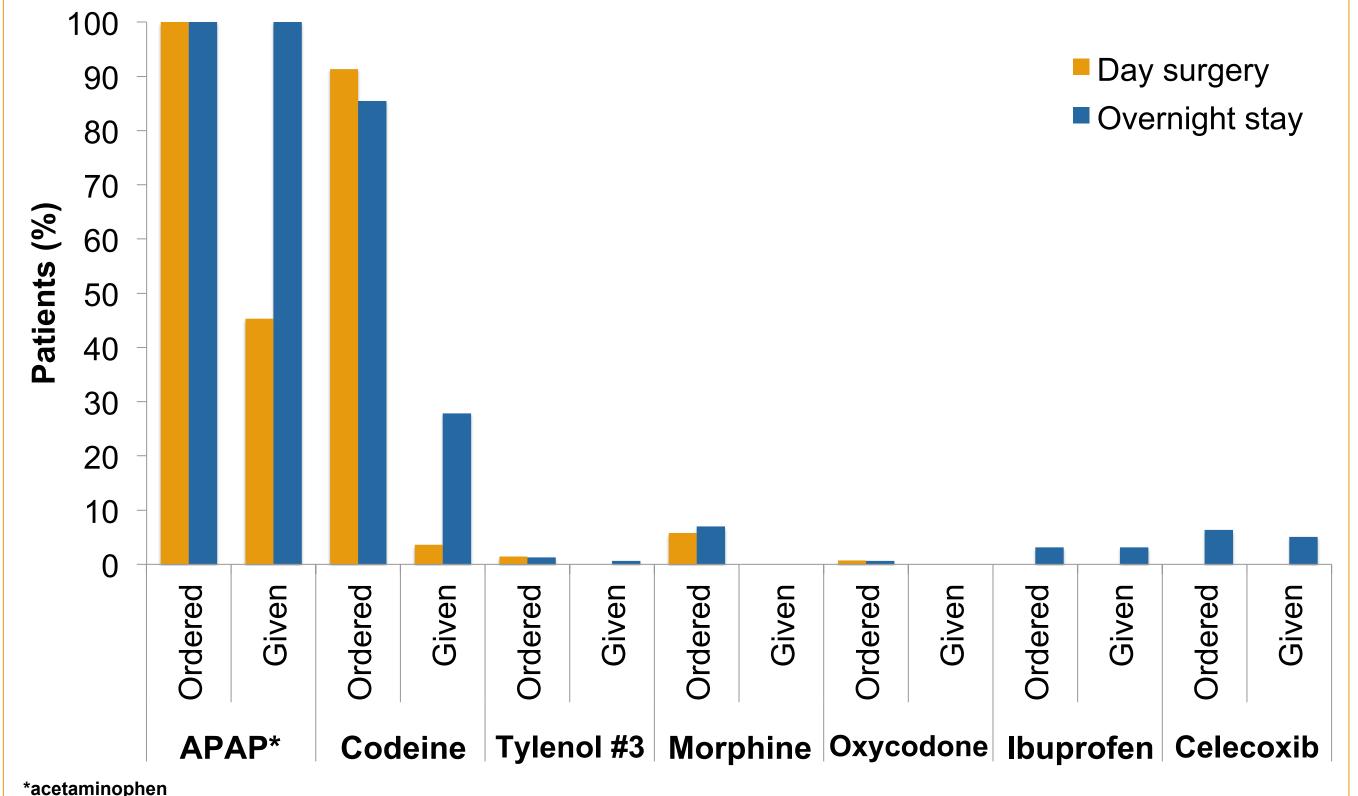
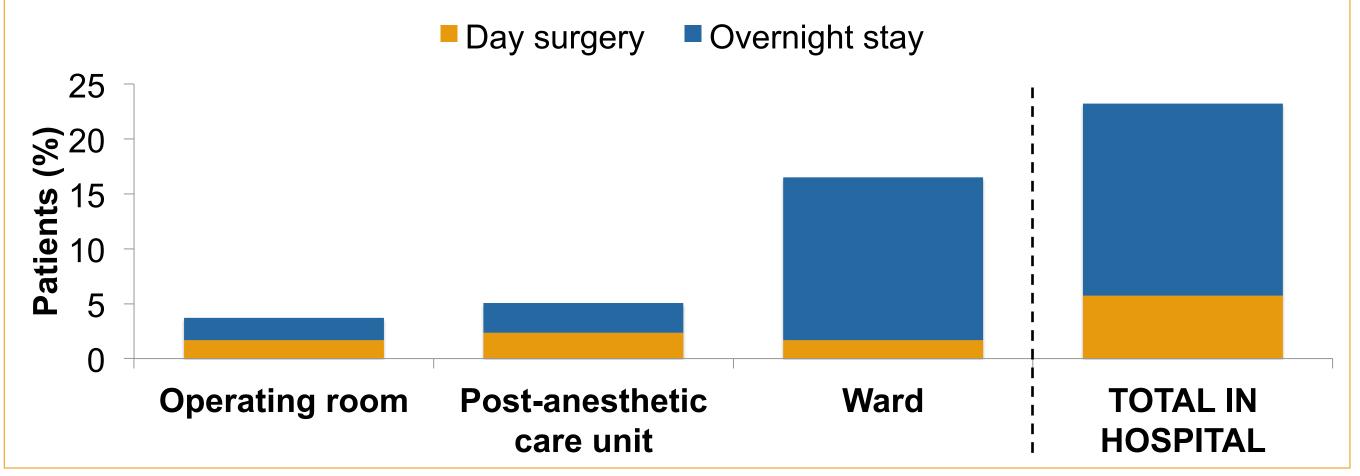


Figure 2: Overall codeine administration rates in hospital



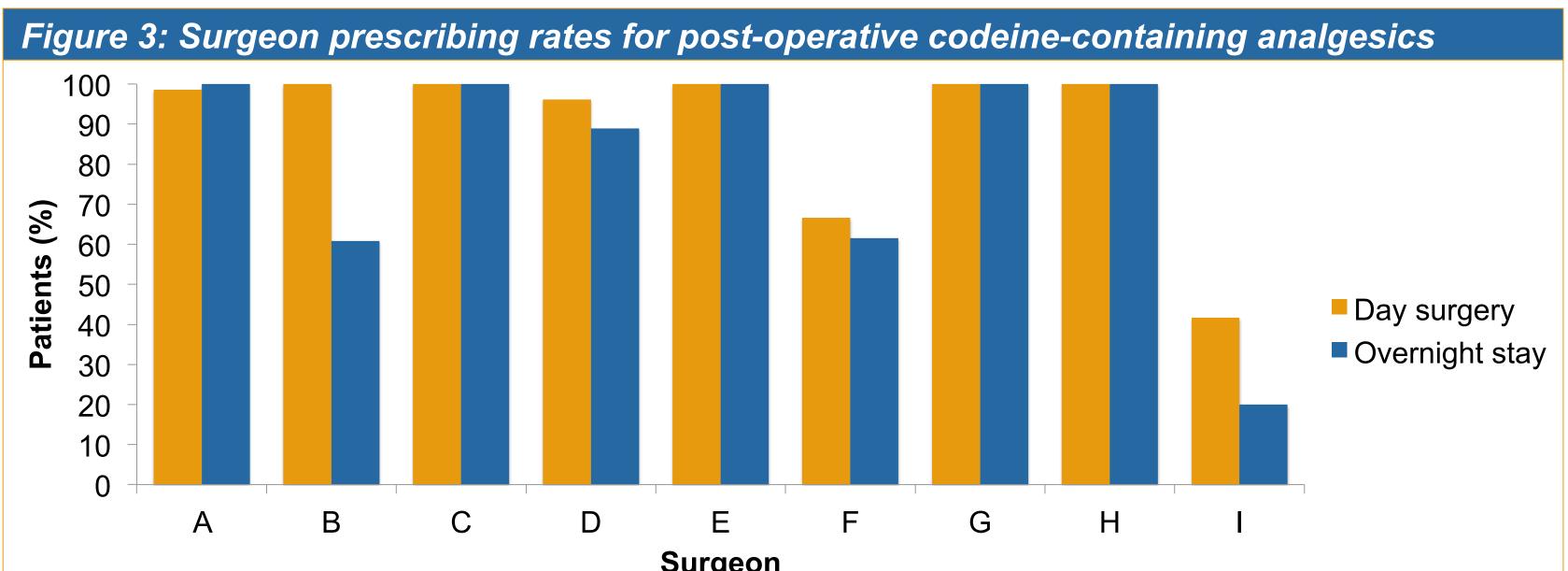
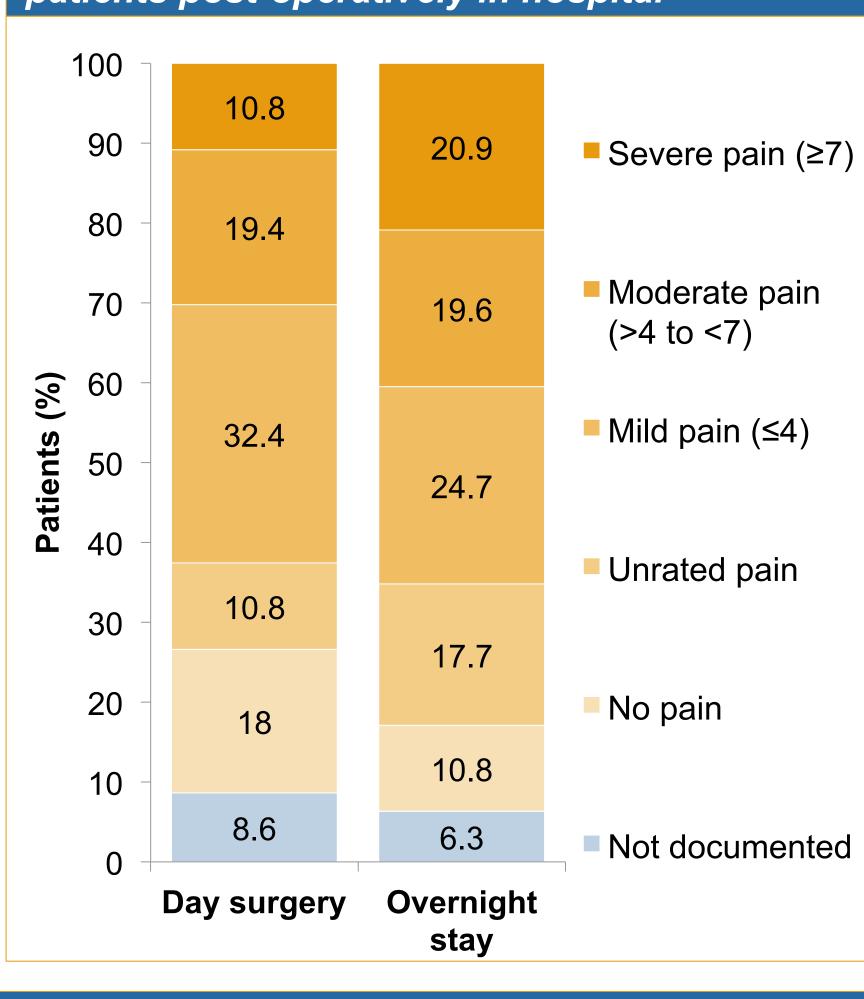


Figure 4: Analgesic regimens ordered for post-operative T&A patients

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Figure 5: Highest level of pain reported by patients post-operatively in hospital



Conclusions

- Codeine was prescribed for 89% of patients post-T&A
- Discharge prescriptions were not routinely documented at SMH
- 23% of patients received a dose of codeine while in hospital
- All surgeons prescribed codeine-containing analgesic regimens
- Less codeine prescribed for overnight stay patients
- A few orders stated to limit use of narcotics overnight or because patient has OSA
- No clear patient-specific factors or prescribing factors identified
- Prescribed alternatives included acetaminophen, celecoxib, ibuprofen, morphine, and oxycodone
- Moderate to severe pain was reported in 30% of day surgery patients and 41% of overnight stay patients









