

## Introduction

- Racial-ethnic disparities in pain management are well-established, but not for patients with pancreatic disease.
- In this study, we seek to evaluate racial-ethnic disparities in opioid prescriptions for patients with acute and chronic pancreatitis and pancreatic cancer.

## Methods

- We used data from the National Ambulatory Medical Care Survey (NAMCS) to examine opioid prescriptions during ambulatory visits by adult pancreatic disease patients between 2006 and 2015.
- Diagnoses were determined by ICD-9 codes 557.0 and 557.1 for pancreatitis and 157 for pancreatic cancer.
- Visits by patients with comorbid painful conditions associated with opioid use were excluded.
- Opioid medications were identified using Cerner Multum Lexicon Plus Drug Database prescription codes.
- We then compared differences in opioid prescriptions by race, ethnicity, and sex.

## Results

- We identified 421 outpatient visits by adults with pancreatic disease and eliminated 18 patients with comorbid painful conditions or for age <18.
- Our analysis included 207 pancreatitis and 196 pancreatic cancer patient visits.
- No sex differences were found among pancreatitis ( $p=0.78$ ) or pancreatic cancer patient visits ( $p=0.57$ ) (Table 1).
- Opioids were prescribed at 58% of non-Hispanic Black, 27% of non-Hispanic White, and 19% of Hispanic pancreatitis patient visits ( $p=0.05$ ) (Table 2).
- Opioid prescriptions were less common in visits by Hispanic compared to non-Hispanic pancreatitis patients (OR 0.35, 95% CI 0.14-0.91,  $p=0.03$ ) and there was a trend toward higher rates in non-Hispanic Black versus non-Hispanic White patient visits (Table 3).
- No racial-ethnic differences in opioid prescriptions were seen among pancreatic cancer patient visits.

Table 1. Percentage of visits with opioid prescriptions by patient sex

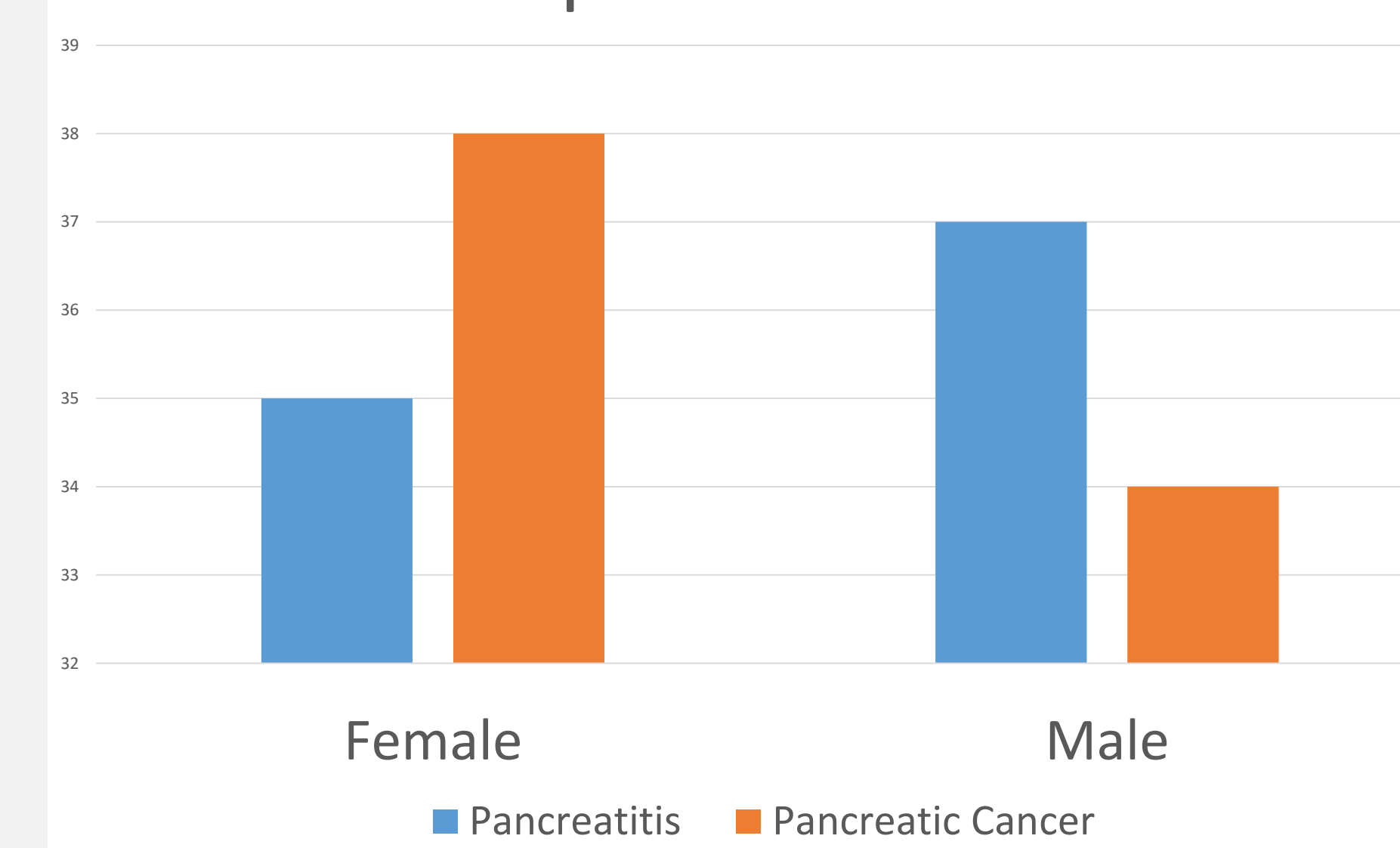


Table 3. Percentage of visits with opioid prescriptions by patient ethnicity

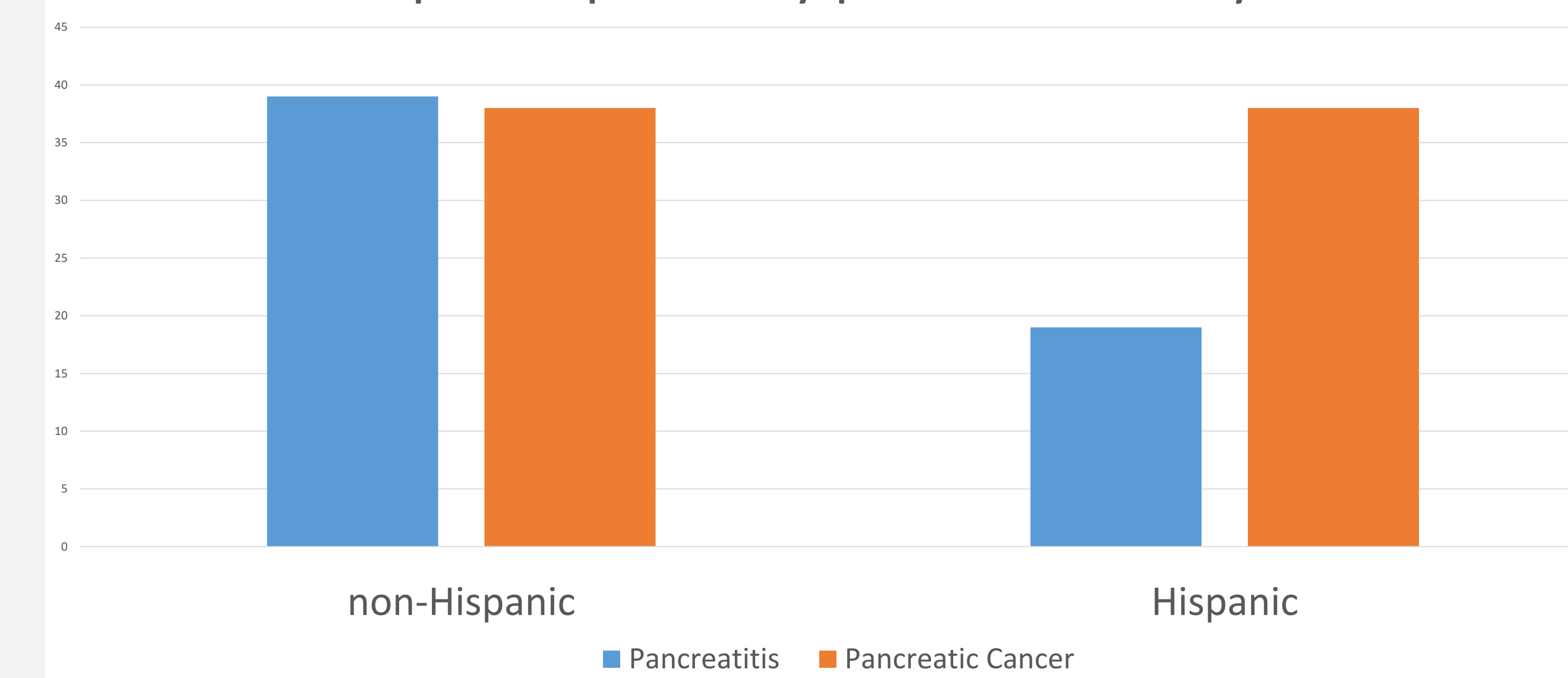
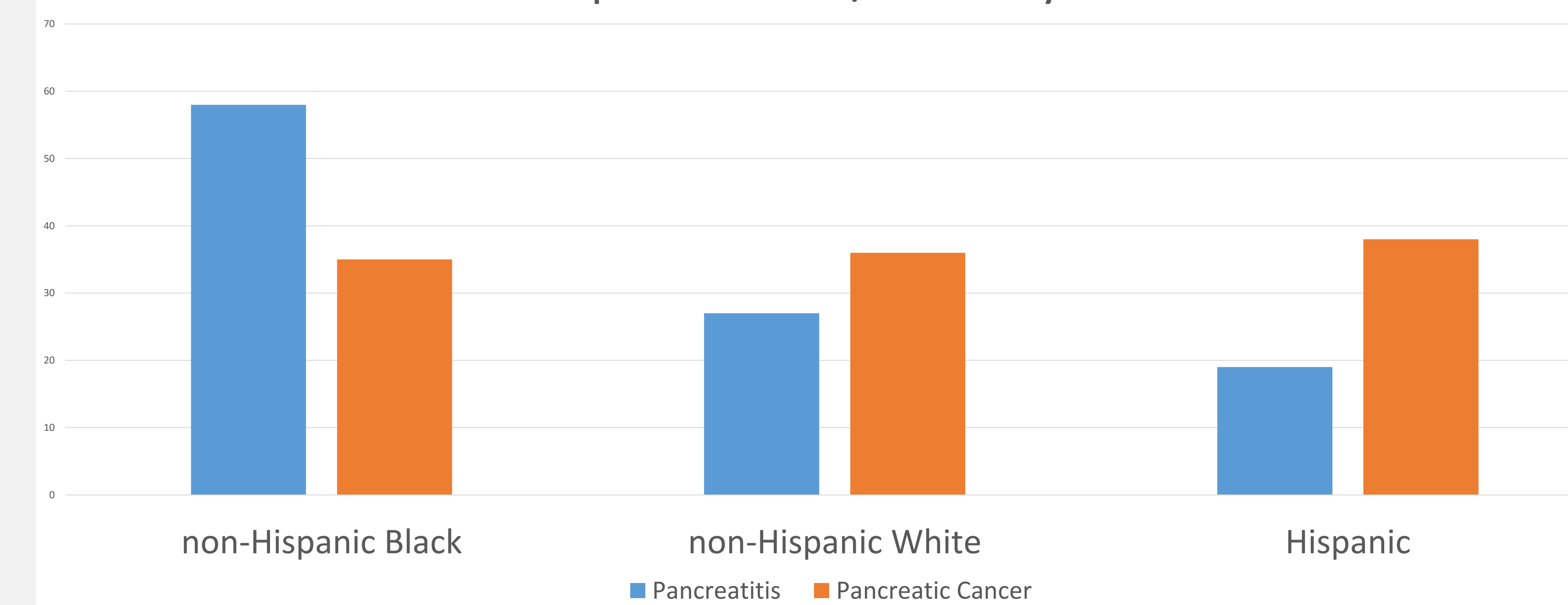


Table 2. Percentage of visits with opioid prescriptions by patient race/ethnicity



## Conclusions

- While racial-ethnic disparities in opioid prescriptions were observed in pancreatitis patient visits, none were seen in pancreatic cancer patient visits.
- These findings suggest racial and ethnic bias in opioid prescription practices for patients with painful but benign pancreatic disease, but there may be a lower threshold for opioid provision in the treatment of malignant and terminal pancreatic disease.

## Contact Information

Nicole McHenry, BA  
[nmchenry@bidmc.harvard.edu](mailto:nmchenry@bidmc.harvard.edu)  
 330 Brookline Ave  
 Boston, MA 02215