Antidepression Treatment Lowers the Risk of Adverse Outcomes for Individuals Receiving Opioids for Chronic Pain


THE ISSUE

Individuals with a history of depression who are receiving opioids for chronic pain are at high risk of adverse events such as overdose or suicidal thoughts, behaviors, and death. However, there is scant evidence about whether antidepressants could reduce such outcomes among these patients.

STUDY FOCUS

The research team used a national commercial claims database to examine the risk of overdose and self-harm among individuals with a history of depression treatment who filled an opioid prescription between 2007 and 2017. They compared the risks of adverse outcomes such as overdose and self-harm between patients who filled antidepressant prescriptions and those who did not.

KEY FINDINGS

Individuals receiving opioid analgesics who have a history of depression had a significantly lower risk of overdose and self-harm once they had been taking antidepressants for at least 6 weeks, the point at which they are likely experiencing the antidepressant’s full benefits.

IMPLICATIONS FOR POLICY

Study findings have clear implications for patients with a history of depression receiving opioid analgesics. Universal screening for mood disorders among individuals receiving opioids and promptly providing evidence-based treatment when appropriate, with close patient follow-up, may reduce adverse outcomes for this vulnerable population. The efficacy and feasibility of such efforts, which are already recommended by leading clinical practice guidelines, merit further investigation.