Outpatient Urine Drug Testing at Initial Visit in a Supportive Care Clinic

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BACKGROUND

- Opioids are the cornerstone of cancer pain management
- Proper prescribing of controlled substances is essential to support patient wellbeing
- Research recommends use of urine drug testing (UDT) to assist clinicians in responsibly prescribing opioids when managing pain
- Guidelines do not indicate when UDT should be utilized in cancer care
- UDT is often limited to random testing or testing of cancer patients with suspected misuse

STUDY AIMS

- To investigate utility of UDT at 1st Supportive Care clinic visit by determining prevalence of abnormal results
- •To examine relationship of demographic and clinical characteristics to presence of illicit drug use

METHODS

 Retrospective chart review of consecutive patients referred between December 2013 and September 2016

Eligibility Criteria

- Diagnosed with cancer
- •18 years of age or older
- Newly referred to an outpatient Supportive Care clinic
- Underwent UDT as part of their clinic visit
- •Edmonton Symptom Assessment Scale (ESAS) patient reported symptoms common in cancer patients
 - •ESAS scores range from 0 to 10 with higher scores representing greater severity in symptoms
- UDT results and ESAS scores obtained through an existing clinical database and chart extraction
- Demographic and clinical characteristics were obtained through Collaborative Data Services

RESULTS

UDT Results

- •1108 patients underwent routine UDT
- •Total number of drug and/or metabolites identified was 3,165

As a percent of total:		
Marijuana	19.9%	
Cocaine	1.4%	
Amphetamines	2.1%	
Heroin	0.20%	
Opioid prescribed/ not present	6.1%	
Prescription drug/not prescribed	19.9%	
Non-prescribed opioids	7.4%	

Patient Characteristics

Demographic Characteristics		Medical Characteristics	
Mean age = 54 (range = 19-90)		Stage III-IV	54%
Female	59%	Disease	
White/Caucasian	82%	Gynecologic	15%
Non-Hispanic	88%	Lung	13%
Married	55%	Breast	11%
Single	23%	Treatment	
Insurance Status		Surgery	54%
Managed care	40%	Chemotherapy	72%
Medicaid	11%	Radiation	36%
Medicare	15%	Immunotherapy	14%
Not insured	4%	Hormone	17%
Self Pay	6%	ESAS	
Tricare	1%	Mean ESAS total score	35.2
Unknown	21%	Mean ESAS pain score	5.2
Veterans affairs	1%		

Associated Variables

 Relationship of demographic and clinical characteristics to presence of illicit drug use

Variables Associated with Presence of Illicit Drug				
Variable		p-value		
Age	-0.18	<.0001		
ESAS total score	0.13	0.00		
ESAS pain score	0.09	0.04		
Male gender	3.49	0.06		
Single, not married	4.05	0.04		

CONCLUSIONS

- Findings suggest use of UDT meets standards of medical necessity to be a credible element of clinical care
- •High rate of irregularities in the results may support obtaining the test at initial visit to guide subsequent care