Opioid Use Among Canadian University Students

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Introduction

• As the opioid crisis continues to grow in Canada, young Canadians (15-24 years) are the fastest-growing population requiring hospitalization due to overdose 1. Opioid use frequently persists into adulthood in those who have an early onset before 25 years-old, having long-lasting health, social and economic impacts 2.
• Opioid overdose has been frequently related to several risk factors, such as alcohol use, substance use, mental health disorders, suicide ideation and childhood trauma 3-5.
• Given the disproportionate impact of the current opioid crisis on young people, it is important to understand their opioid use better and to identify risk factors potentially associated with opioid overdose in this population.

Objectives

1. Analyze the lifetime prevalence of street opioid and prescription opioid use among Canadian university students, and their opioid use initiation patterns.
2. Explore the main reasons for opioid prescription and adherence to opioid prescription guidelines.
3. Examine the prevalence of important overdose risk factors among the subset of students who reported the reason for opioid use initiation.

Methods

• This study investigates data from an ongoing, weekly cross-sectional student mental health and substance use survey at the University of British Columbia, which was weekly-administered since 2020 under the WHO World Mental Health College Student (WMH-ICS) Initiative.
• A preliminary chi-squared analysis was conducted using SPSS on the first 118 weeks of data extracted in May 2022 (N=13,079).

Results

LIFETIME USE OF OPIOIDS

15.5% Prescription opioid use as prescribed
3.9% Prescription opioid use not as prescribed
1.2% Street opioid use (e.g., Fentanyl)

Opioid Use Initiation Reasons (n=1642)

48% Cancer-related pain
16% Post-surgical pain
14% Muscles, joints or soft tissue pain
2% Visceral, Neuropatic or other pain
2% Offered from someone who used opioids for non-medical reasons
2% Used opioid prescribed to a family member or close acquaintance
2% Bought opioid on the street
1% Other

Characteristics of First Opioid Prescription For Non-cancer Pain

First Prescription

97.3% Opioid prescription directly
5.9% Brief non-opioid treatment before resorting to opioids
3.1% Optimal trials of non-opioid treatments before resorting to opioids
2% Successfully tapered down, discontinued opioid use and never used again
1% Successfully tapered down, discontinued opioid use, but still taking opioid or started use again later
1% Did not taper down, but eventually stopped using on their own

Prevalence of Common Opioid Overdose Risk Factors

Discussion

• Most students first used prescribed opioids for non-cancer pain treatment. Among them, 97.3% no longer use any opioids, even though opioid prescriptions could lead to future misuse 6. Most did not receive optimal trials of non-opioid treatments before resorting to opioids and physicians did not try to taper down in 40.7% of the reported cases.
• Students who first used opioid for recreational reasons had a significantly higher prevalence of overdose risk factors than those who initiated use for medical reasons. Biopsychosocial factors contributing to mental health issues may initiate and/or perpetuate opioid misuse 3-5, and concomitant use of opioids with alcohol, cannabis or pharmaceutical CNS depressants can cause increased risk of overdose by depressing the CNS.

Future Directions

• As post-surgical pain seems to be a major reason of opioid prescription in university student, clear opioid prescription guidelines for acute pain management is critically needed.
• Further research is needed to confirm the significance of the reason for opioid initiation in identifying students at greater risk of opioid overdose, which may help health care providers and public health policy makers to address the opioid crisis.

References


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