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Impact of ambiguous and restrictive regulations on opioid-prescribing practice in Georgia

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While there is a wide dispute regarding long term opioid use for different health conditions worldwide, chronic pain management with opioids remains a challenge even in incurable patients in many countries, including Georgia. One of the most prominent causes of undertreating pain is overly restrictive legislation, which is regulating use of opioids for pain management. Besides the regulations, creating a variety of barriers, there are some contradictory elements within the older regulations and normative orders adopted later in Georgia, that confound the regulatory parameters and can strengthen physicians' unwillingness to prescribe such medications.

To identify barriers to pain management in Georgia we conducted a survey among 550 primary health care physicians (Family Doctors) that are responsible on opioid prescription. Overall, 289 questionnaires were analyzed. To highlight all possible consequences of the irrationally strict legislation, we studied influence of restrictions on physicians' medical practice, administrative issues, physicians' understanding of legislative aspects governing opioid use, and their impact on opioid-prescribing practice.

We found that 38% of the physicians avoid prescribing opioids at all and only one-third of them make an independent decision to treat the patients with opioids. About one-third of the physicians know the updated liberalized legislation and even fewer follow it. The physicians and administrators or managers of their health care facilities prefer to follow the old regulatory rules. Those who apply more liberal legislation and have better medical practice are investigated three to five times more by legal authorities for prescribing morphine to incurable patients than those who do not. Those physicians who know anyone that has been investigated because of opioid prescribing practice, are more concerned that they can be also investigated. Physicians who are concerned that they might be investigated are less inclined to prescribe opioids or use liberalized regulations. Hence, ambiguous legislation negatively influences opioid-prescribing practice.

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