

Assessment of prior opioid tolerance among new users of fentanyl transdermal system in FDA's Sentinel System

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Background

- Some extended-release and long-acting (ER/LA) opioid analgesic formulations and dosages are intended only for patients with prior opioid tolerance
 - Extended-release hydromorphone all doses
 - Extended-release oxycodone (single dose >40 mg or daily dose >80 mg)
 - Fentanyl transdermal system (FTS) <u>all doses</u>



REMS for ER/LA opioid analgesics

- FDA approved a Risk Evaluation & Mitigation Strategy (REMS) for ER/LA opioid analgesics in July 2012
- Requires ER/LA opioid analgesic sponsors to fund provider education on safe prescribing
- "Blueprint" developed by FDA includes
 - Assessing patients for treatment
 - Initiating, modifying, and discontinuing therapy
 - Monitoring ongoing therapy
 - Counseling patients about safe use
 - Being familiar with product-specific drug information



Evaluating REMS Impact

Candidate metrics for monitoring ER/LA opioid analgesic REMS impact have been proposed

 A metric to identify opioid tolerance in patients prescribed select ER/LA opioid analgesics was developed and applied to the US Medicare population (Willy et al 2014)



Objective

 To identify the proportion of new FTS users <65 years who had evidence of prior opioid tolerance, stratified by product strength and tolerance definition



Sentinel Initiative

- Launched in 2008 by FDA to leverage electronic data sources (largely claims) for medical product safety surveillance
- Sentinel utilizes a distributed database with data partners throughout the US
 - Currently 17 Data Partners primarily commercial insurers
 - >200 million unique members



Methods

- 13 Data Partners
- Retrospective cohort
- Jan 1, 2009 Dec 31, 2013
- Inclusion criteria:
 - <65 years of age
 - First incident dispensing of FTS / user, 183 day washout
 - Medical and pharmacy enrollment during washout period
- Exclusion criteria:
 - Medical claim for opioid poisoning during washout period
 - Inpatient stay 30 days prior to dispensing



Tolerance definitions

	Per day for 7 <u>consecutive</u> days immediately prior to new opioid-tolerant- only dose index date	Per day for <u>any</u> 7 days in 30 days prior to new opioid-tolerant-only dose index date
≥ 30 mg oxycodone equivalents	Primary Definition	Secondary Definition
> 0 mg oxycodone equivalents	Tertiary Definition	Quaternary Definition



Analysis

- Stratified by tolerance definition, sex, age category, year, and strength
 - 12, 25, 75, 100 mcg/hr + non-manufacturer strengths (multiple dispensings occurring on the same day were summed)

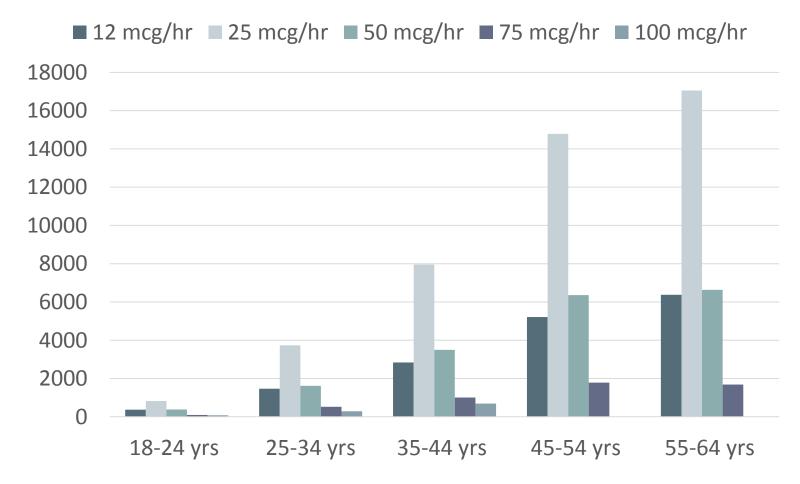


Number of fentanyl patch episodes by strength, 2009-2013

	12 mcg/hr	25 mcg/hr	50 mcg/hr	75 mcg/hr	100 mcg/hr		
Episodes	16,379	44,450	18,527	5,118	3,507		
Age (yrs)							
0-11	32	23	7	2	4		
12 - 17	75	79	32	11	8		
18 - 24	375	827	380	99	77		
25 - 34	1,464	3,731	1,614	523	290		
35 - 44	2,841	7,954	3,502	1,011	686		
45 - 54	5,214	14,785	6,358	1,785	12,76		
55 - 64	6,378	17,051	6,634	1,687	11,66		
Sex							
Male	5,124	18,327	8,727	2,510	1,839		
Female	11,255	26,123	9,800	2,608	1,668		



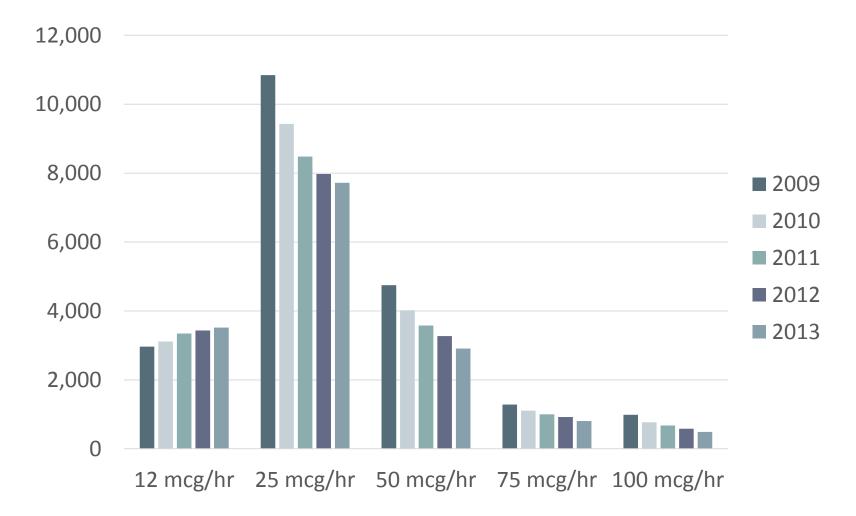
Number of fentanyl patch episodes by strength and age, 2009-2013



Members <18 yrs have age had <100 episodes per strength

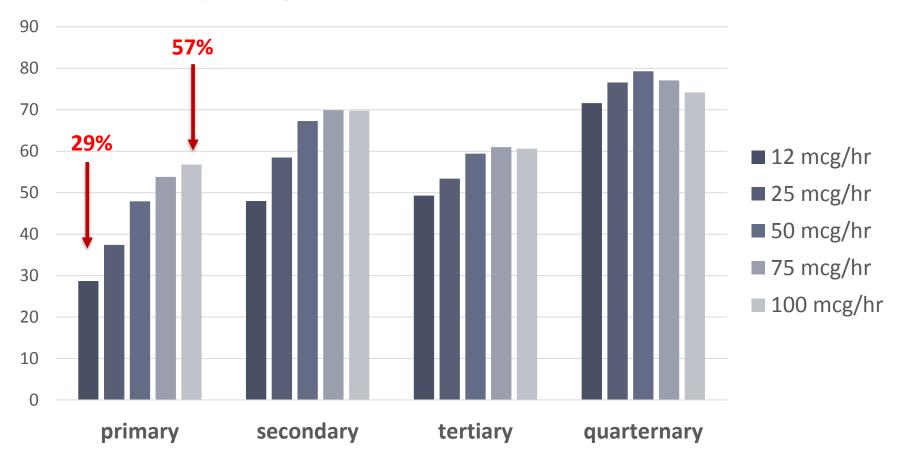


Number of fentanyl patch episodes by strength and year, 2009-2013





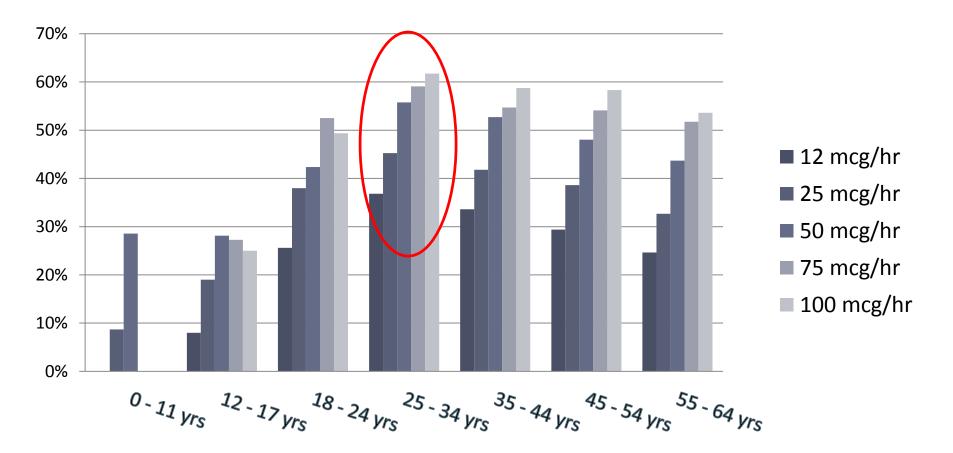
Fentanyl patch episodes with evidence of prior tolerance by strength & tolerance definition, 2009-2013



Primary ≥30 mg / d in prior 7 consecutive days **Tertiary** >0 mg / d in prior 7 consecutive days Secondary ≥30 mg / d for 7 d in 30 d prior Quaternary >0 mg / d for 7 d in 30 d prior



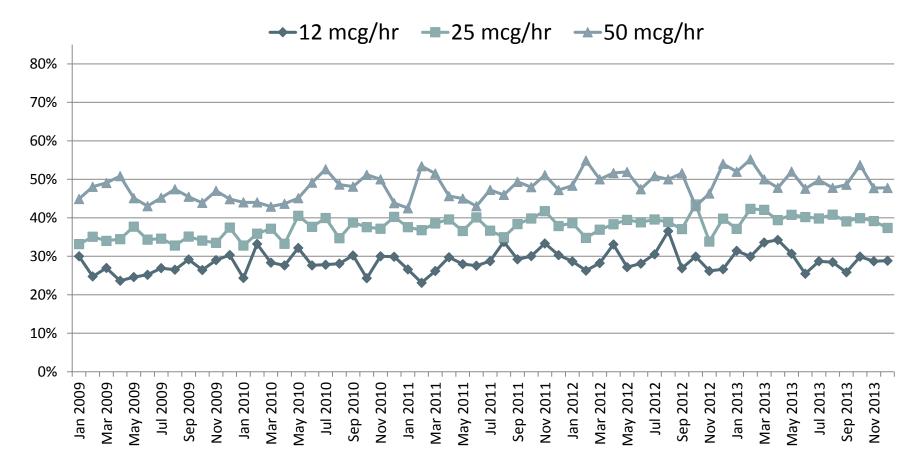
Fentanyl patch episodes with evidence of prior tolerance by strength & age, primary definition, 2009-2013



Primary def: ≥30 mg / d in prior 7 consecutive days



Fentanyl patch episodes with evidence of prior tolerance by strength & time, primary definition, 2009-2013



Primary def: ≥30 mg / d in prior 7 consecutive days



Large proportion of FTS episodes lack evidence of tolerance

- Proportion with prior tolerance especially low among patients receiving lower strength fentanyl patches
- Nearly half (43%) of those with highest strength product do not have evidence of tolerance by the primary definition
- REMS-affiliated provider training started March 2013; thus, these data do not provide sufficient opportunity to evaluate the impact of training on safe prescribing practices



Strengths and limitations

- Size of Sentinel distributed data network
- Limitations:
 - Algorithm for determining opioid tolerance has not been validated
 - Predominantly commercially insured
 - Opioid dispensings incomplete if members bypass insurance and pay out-of-pocket
 - Prior opioids may have been provided in setting not captured in data (e.g. rehab)



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Questions?

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