

Abstract B369 Figure 1

**Conclusions** The proportion of patients that were restarted on buprenorphine within 180 days following surgery increased over time. Patients who were restarted on buprenorphine following surgery chronically filled prescription for short acting opioids less commonly compared to patients who were not restarted.

### B370 OUTPATIENT PRESCRIPTION CANNABINOID UTILIZATION RATE IN THE UNITED STATES: A POPULATION-BASED STUDY

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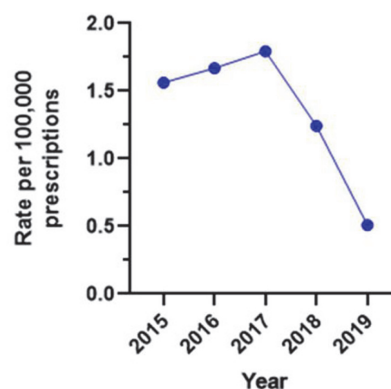
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**Background and Aims** Cannabis utilization for medical and recreational purposes is increasing in the United States, but information on trends in prescription cannabinoid use in the outpatient setting is lacking. Four prescription cannabis-based or cannabis-derived medications have been approved by the Food and Drug Administration (FDA) for the treatment of chemotherapy-induced nausea and vomiting, wasting syndrome due to HIV/AIDS or intractable seizures. The study sought to determine the prevalence of prescription cannabinoid utilization over time and associated diagnosis categories of patients using these medications.

**Methods** After Institutional Review Board approval (IRB#2017-0169), we retrospectively examined all patients who were prescribed FDA-approved cannabinoids between 2015–2019 using commercial claims data from the Truven MarketScan database. We studied annual utilization and characteristics of users including gender, median household income, US region, and comorbidity burden.

**Results** A total of 50,161 FDA-approved cannabinoid prescriptions were written during the study period. Dronabinol accounted for over 99.7% (N=50,033) of these prescriptions. The rate of cannabinoid prescriptions per 100,000 prescriptions decreased over time (Figure 1). Most patients prescribed cannabinoids were from the southern United States, had a high comorbidity burden and were diagnosed with chronic pain (Table 1).

Figure 1



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Age, Median [IQR]	53 [42,60]
Gender of Patient, N (%)	
Male	7044 (47.3)
Female	7837 (52.7)
MSA MEDIAN INCOME (US dollars), N (%)	
<\$58,000	3707 (24.9)
\$58,000- \$76,000	5647 (37.9)
>\$76,000	2495 (16.8)
UNKNOWN	3032 (20.4)
Region in the US, N (%)	
Northeast	2529 (17)
North Central	2728 (18.3)
South	7721 (51.9)
West	1862 (12.5)
Unknown	41 (0.3)
Elixhauser co-morbidity index, N (%)	
0	801 (5.4)
1	1136 (7.6)
2	1507 (10.1)
3	1708 (11.5)
4+	9729 (65.4)
Chronic pulmonary disease	4039 (27.1)
Depression	5059 (34)
Hypotension	6649 (44.7)
Fluid and electrolyte disorders	6597 (44.3)
Metastatic cancer	6488 (43.6)
Solid tumor w/out metastasis	8160 (54.8)
Weight loss	4654 (31.3)
Liver disease	3742 (25.1)
Cardiac disease	4444 (29.9)
Comorbid chronic pain	12570 (84.5)
Comorbid substance use	4297 (28.9)

**Conclusions** Overall, outpatient prescription cannabinoid utilization decreased between 2015–2019. This may reflect an increase in access to and use of medical cannabis from state dispensaries, or preferential use of other medicines and non-pharmacological approaches for symptom management. Higher rates of dronabinol use in the south may reflect discrepancies in access to state products because of staggered legalization or more restrictive state laws.

### B371 LONG-TERM FOLLOW-UP OF SPINAL CORD STIMULATION: A CROSS-SECTIONAL STUDY OF A 10-YEARS EXPERIENCE IN A SINGLE CENTRE

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