



# PRESS RELEASE

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FOR IMMEDIATE RELEASE

## Many Tennesseans May Be Unknowingly Addicted to Pain Medication

Thousands of Tennesseans may be addicted to a prescription pain medication that is probably no more effective than over-the-counter pain relievers.

Propoxyphene (pro-POX-ih-feen), the active ingredient in Darvon, Darvocet and many generic pain medications, has been prescribed to patients in Tennessee since 1957. However, recent Medicare data shows that 55 percent of all medications prescribed in the state that pose a potential threat to patients are due to one drug – Darvocet N-100 – which contains 100 milligrams of propoxyphene.

“Propoxyphene has been associated with over 2,000 accidental deaths in the U.S. and, because propoxyphene is an opioid, it is physically addictive,” said Dr. Stephen Winbery, a Medical Director with QSource, the Medicare quality improvement organization for Tennessee. “Besides being addictive, propoxyphene’s effect on the central nervous system include dizziness, mild sedation, and light-headedness, which may increase the risk of falls, and it has been identified as a risk factor for hip fractures in older Americans, yet in clinical trials, propoxyphene is no more effective at treating pain than other safer alternatives, such as acetaminophen, the active ingredient in Tylenol.”

Each dose takes 30 to 36 hours to be completely eliminated from the body. Older adults are prone to a high risk of accumulating the drug in their system if they take repeated doses, and the drug has been placed on a national list of potentially inappropriate medications for senior citizens. And it is still widely prescribed among Medicare Part D beneficiaries in Tennessee.

Why?

A recent study suggests that physicians are used to prescribing the older drugs and may not be aware of the risks. Older drugs tend to be less expensive for the consumer, so cost may be a factor in drug selection. Patient requests play a significant role. Because patients can become dependent on propoxyphene, the study suggests the need for targeting physician knowledge and prescribing habits, medication cost management and patient demand for pain relievers.

QSource has been tasked by Medicare to reduce the rate of drug-to-drug interactions and the prescribing of potentially inappropriate medications in people 65 and older.

Reducing the use of inappropriate medications and drug interactions are both factors in lowering the number of medication errors that occur in the United States. Older adults, especially low-income seniors living at home, are seven times more vulnerable to medication errors than any other age group.

According to several studies, medication problems among elders are the 5th leading cause of death and enormously costly - America spends nearly \$200 billion annually treating the results of these errors, and many are caused by prescriptions being written by doctors who are unaware of other medications their patients may be taking.

Yet, these medication problems are largely preventable through improved communication between providers and patients, and by educating and empowering patients to take a more active role in ensuring the quality of their healthcare. Educating providers and consumers about the dangers surrounding propoxyphene and reducing its use is an important first step.

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QSource is a healthcare consulting organization located in Memphis that holds the state's Medicare quality improvement organization contract. Under a contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services, the organization provides healthcare quality improvement collaborative opportunities for the providers, practitioners, and managed care plans that care for approximately 1 million Medicare beneficiaries in Tennessee.

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#### Fast Facts

On June 22nd, 2008, Public Citizen, a consumer interest group, filed a federal lawsuit against the U.S. Food and Drug Administration (FDA), alleging that the FDA violated the law by failing to act on a petition filed in 2006, urging the removal of Darvocet, Darvon and other generic propoxyphene drugs from the market.

The lawsuit goes on to say that despite health authorities in England removing this drug from their market three years ago, the U.S. drug regulators have not taken any actions to protect consumers from the dangerous side effects to the heart, the liver, and the central nervous system, especially in people 65 and older.



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