

Opioid Prescribing Patterns For Outpatient Ventral Hernia Repair

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Disclosures

- Dr. Petro
 - Consultant – BD, Surgimatix, Advanced Medical Solutions



Opioid Task Force

ORIGINAL ARTICLE

The opioid reduction task force: using the ACHQC Data Registry to combat an epidemic in hernia patients

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ORIGINAL ARTICLE



Predictors of low and high opioid tablet consumption after inguinal hernia repair: an ACHQC opioid reduction task force analysis

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Study Question

*What about outpatient
ventral hernia repair with
mesh?*

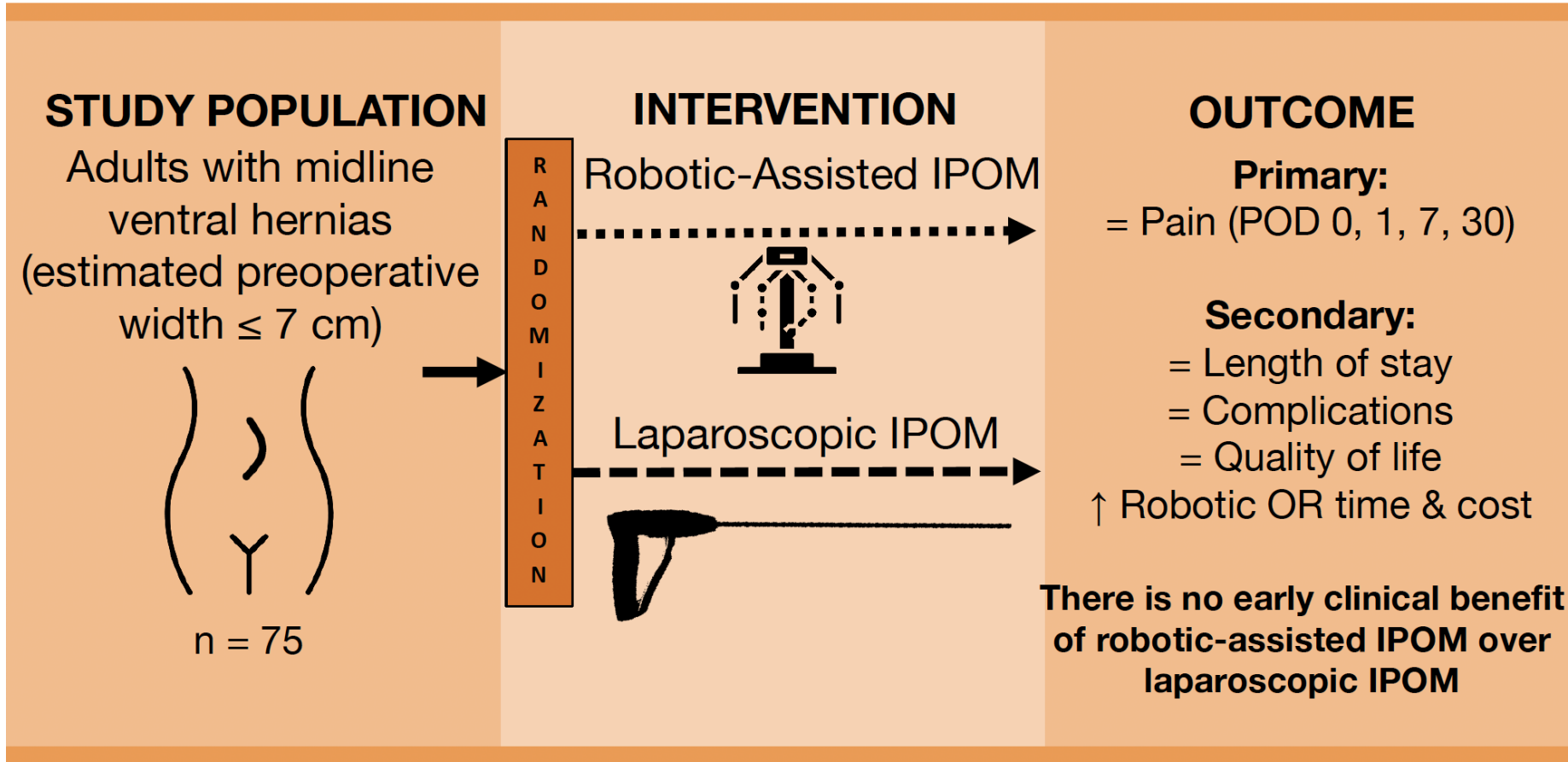


Outpatient Ventral Hernia Repair = Unique

- Notoriously painful
- Prescribing less confounded by hospital LOS
- Very heterogenous
 - Hernia size
 - **Technique**
 - Approach
 - Mesh location



Prospective, **R**and**O**mized Controlled Trial of Robotic versus Laparoscopic **V**entral Hernia Repair with **I**n**T**rapertitoneal Mesh – **The PROVE-IT Trial**

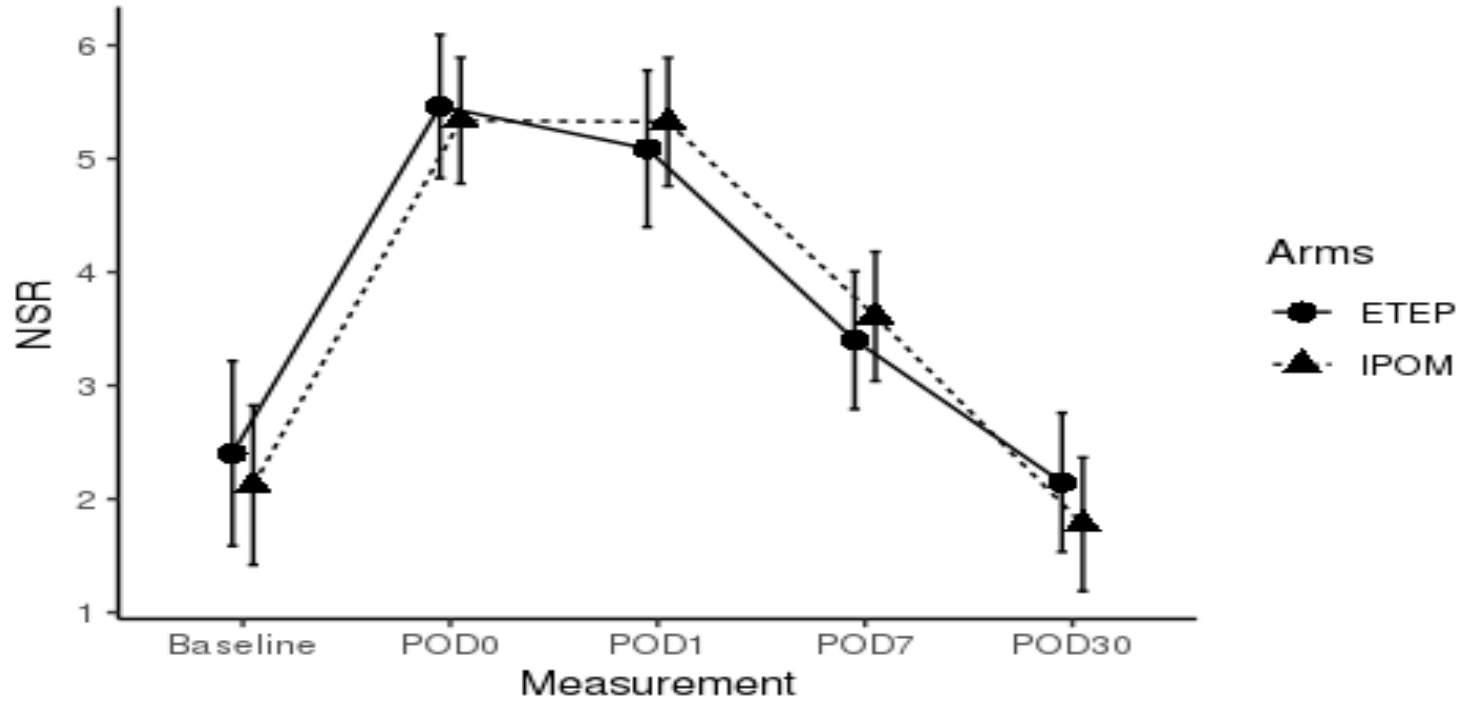


Robotic eTEP versus IPOM evaluation: the REVEAL multicenter randomized clinical trial

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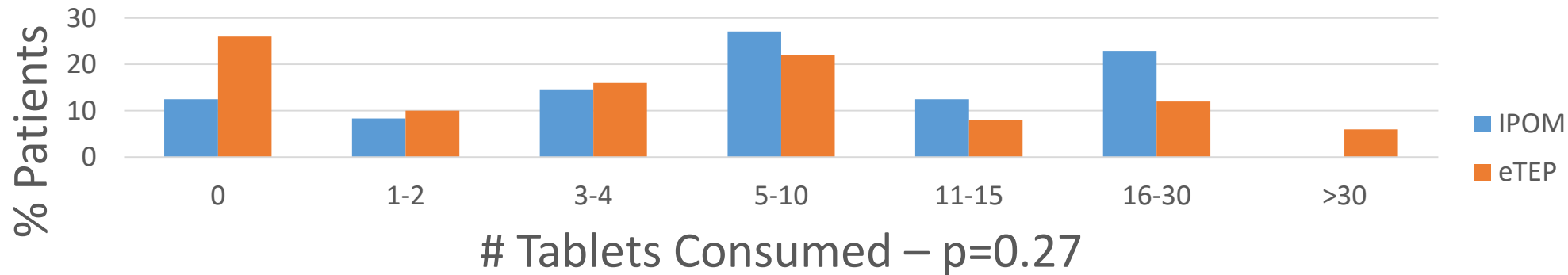


Mean NSR depending on Arms and Measurements
Error bars represent 95% Confidence Intervals



	Robotic IPOM	Robotic eTEP
Chronic Opioid Use	6% (1/31)	6% (2/34)
Other Chronic Substance Abuse	6% (2/31)	6% (2/34)

POST-OP OPIOID TABLET CONSUMPTION



Methods

- Ventral Hernia Repair w/ Mesh
- Same-day or Next-day Discharge
- 30-day F/U
- Surgeon Prescribing/Pt Consumption



Results

	n	Median (IQR) Tablets Prescribed	Median (IQR) Tablets Consumed	% Consumed ≤ 10 Tablets	Median (IQR) Tablets Left Over
Open	1288	10 (8-12)	2 (0-10)	87.7% (1129)	6 (0-10)
Onlay mesh	128	10 (8-20)	2 (0-10)	88.3% (113)	5 (0-13)
Preperitoneal mesh	637	10 (8-15)	2 (0-10)	85.4% (544)	6 (1-10)
Retromuscular mesh	172	10 (10-15)	4 (0-10)	85.5% (147)	6 (2-11)
Intraperitoneal mesh	351	10 (7-10)	4 (0-10)	92.6% (325)	5 (0-10)
MIS – Intraperitoneal mesh	635	12 (10-20)	5 (1-10)	78.4% (498)	6 (0-10)
Robotic	356	10 (10-20)	4 (0-10)	77.2% (275)	6 (0-10)
Laparoscopic	279	12 (10-20)	5 (2-10)	79.9% (223)	6 (0-10)
MIS – Extraperitoneal mesh	872	10 (10-16)	4 (0-10)	84.2% (734)	6 (1-12)
Retromuscular mesh	474	13.5 (10-18)	4 (0-10)	82.5% (391)	8 (2-13)
Preperitoneal mesh	398	10 (8-15)	2 (0-10)	86.2% (343)	6 (1-10)

Results

	n	Prescribed ≤ 10 tablets (n)	Median (IQR) Left Over Prescribed ≤ 10 tablets	Median (IQR) Left Over Prescribed ≥ 10 tablets
Open	1288	67.3% (867)	5 (0-8)	10 (2-16)
Onlay mesh	128	59.4% (76)	3 (0-6)	18 (5-20)
Preperitoneal mesh	637	64.1% (408)	6 (0-8)	10 (2-16)
Retromuscular mesh	172	51.2% (88)	6 (0-8)	12 (2-15)
Intraperitoneal mesh	351	84.0% (295)	5 (0-8)	8 (2-12)
MIS – Intraperitoneal mesh	635	49.6% (315)	5 (0-8)	10 (2-18)
Robotic	356	51.1% (182)	6 (0-8)	10 (2-18)
Laparoscopic	279	47.7% (133)	4 (0-8)	10 (2-18)
MIS – Extraperitoneal mesh	872	50.7% (442)	5 (0-8)	12 (5-16)
Retromuscular mesh	474	39.2% (186)	5 (0-8)	12 (5-16)
Preperitoneal mesh	398	64.3% (256)	5 (0-8)	12 (4-16)

Conclusions

- Overprescribing still prevalent in outpatient ventral hernia repair.
- Consumption appears to be a function of prescribing.
- ≤ 10 opioid tablets is sufficient for outpatient ventral hernia repair

