

Health Employment and Longevity Project

Research Brief

Relationships between self-reported prescription hydrocodone, oxycodone, and tramadol use and unintentional injuries among those with spinal cord injury

Introduction

Spinal cord injuries are chronic disabilities impacting physical and sensory abilities. They can impact anyone regardless of age, race, or gender. Intentional harm or unintentional accidents can both cause injury. After a SCI has occurred, people have a higher risk of future unintentional injuries. One risk factor for future unintentional injuries is pain medication use. Even though people commonly use opioids after a spinal cord injury, the connections between opioid use and future unintentional injuries are not well understood. However, researchers are currently studying this relationship to help prevent future injuries.

Key Findings

- More than 300,000 individuals have a spinal cord injury in the United States
- Each year an estimated 18,000 new injuries occur due to motor vehicle crashes (38%), falls (31%), acts of violence (15%) and sports/recreation activities (8%), among other causes.
- Hydrocodone was most strongly related to the unintentional injuries, particularly overall injuries and non-fall related injuries
- Each of the three opioids were related to fall related injuries
- Even using no more than monthly, was associated with an elevated risk of fall related injuries

What does this mean? (Conclusion) future implications

To lower the risk of future injuries, people with SCIs can change the level of their opioid use by meeting regularly with their family physician or pain management specialist. Physicians can effectively intervene by changing their opioid prescribing patterns. Physicians can also help prevent more injuries by providing medicine to treat people with opioid use disorder. Together, each of these interventions can help reduce risky opioid use resulting in less injuries, addictions, or death.

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