Risk estimation for non-medical opioid use in cancer patients

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Dear Editor: I read the article by Yennurajalingam et al. (2021a) with interest. The authors developed a nomogram to predict the risk of non-medical opioid use (NMOU) among cancer patients receiving outpatient supportive care. They defined the risk of NMOU (+risk) as Screener and Opioid Assessment for Patients with Pain (SOAPP-14) score of ≥7. By the multivariate logistic regression model, the probability of +risk was estimated. +risk was significantly associated with gender, race, marital status, smoking status, depression, anxiety, financial distress, morphine equivalent daily dose (MEDO), and Cut Down-Annoyed-Guilty-Eye Opener (CAGE-AID) score. They established a practical nomogram to assess the +risk, which can be conducted by routinely collected clinical data, and I present a comment about their study.

The same authors reported the independent predictors for NMOU behavior (Yennurajalingam et al., 2021b). A total of 19% patients developed NMOU behavior within a median duration of eight weeks after initial supportive care clinic consultation. Adjusted hazard ratio (95% CI) of single, divorced, SOAPP score of ≥7, MEDD, and Edmonton Symptom Assessment Scale pain level for the presence of NMOU behavior were 1.58 (1.15–2.18), 1.43 (1.01–2.03), 1.35 (1.04–1.74), 1.003 (1.002–1.004), and 1.11 (1.06–1.16), respectively. This paper presented that NMOU behavior could be significantly associated with five factors, and SOAPP score of ≥7 was one of the significant contributors for NMOU behavior. Although the authors established a practical nomogram to assess the +risk, NMOU behavior cannot be estimated adequately by their practical nomogram. I recommend the authors presenting a nomogram for estimating NMOU behavior instead of +risk.

Disclosure statement

No potential conflicts of interest were disclosed.

References

Yennurajalingam S, Edwards T, Arthur J, et al. (2021a) The development of a nomogram to determine the frequency of elevated risk for non-medical opioid use in cancer patients. *Palliative & Supportive Care* **19**(1), 3–10.

Yennurajalingam S, Arthur J, Reddy S, et al. (2021b) Frequency of and factors associated with nonmedical opioid use behavior among patients with cancer receiving opioids for cancer pain. *JAMA Oncology* **7**(3), 404–411.