







THE INCLUSION OF TRAMADOL FOR PARENTERAL USE IN THE NARCOTIC TABLE OF PHARMACOPOEIA: ANALYSIS OF EFFECTS AND CONSUMPTION IN A GENERAL HOSPITAL SETTING

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Background e importance

Tramadol is an opioid analgesic drug for moderate pain. From 08/11/2022 the Minister of Health of a European country ordered the inclusion of tramadol (only for parenteral administration (Inj.)) in the narcotic table of Pharmacopoeia. This measure reflects the concerns by the World Health Organization regarding the potential abuse of tramadol (Inj.).

Material and methods

The analysis of the consumption of tramadol(100mg/2ml) compared to ketorolac(30mg/ml), diclofenac(75mg/3ml) and paracetamol(10mg/ml) was carried out in the period between 08/05/2022 and 08/05/2023, considering the 13 wards with the highest tramadol consumption. We compared the quantity of tramadol requested to the pharmacy 6 months before and 6 months after the decree was issued.

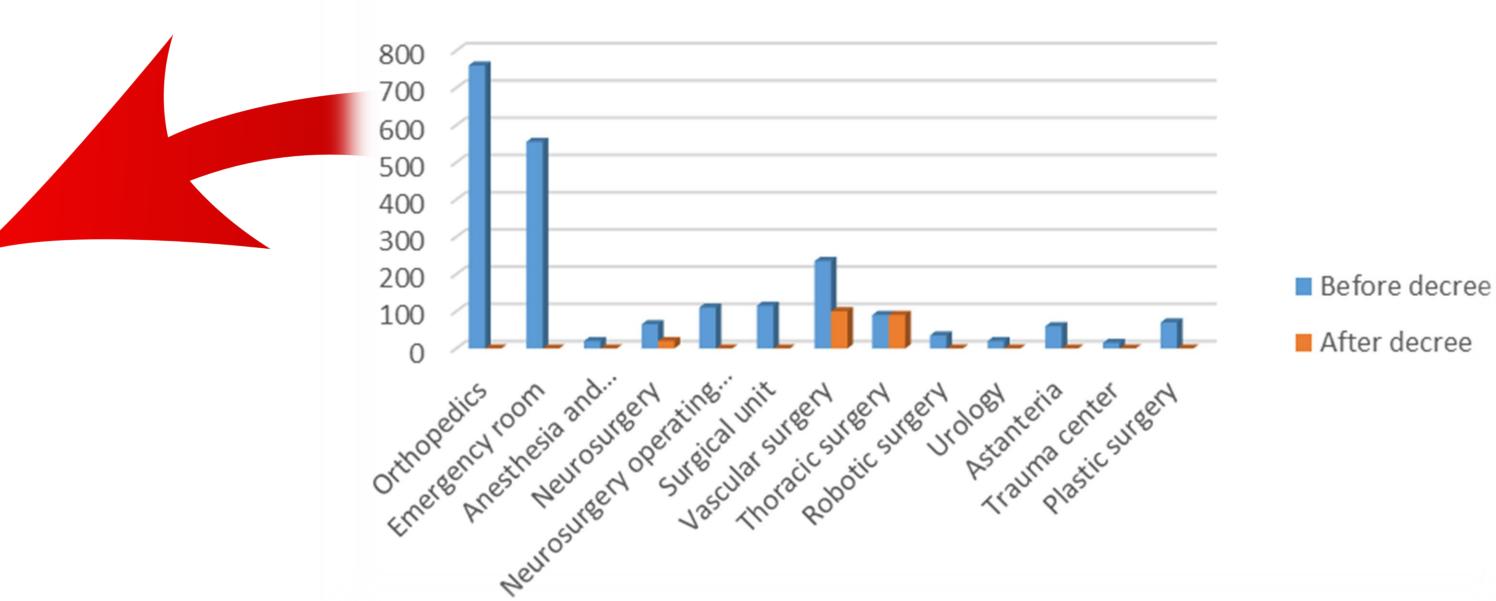
Aim and objectives

The objective of the study was to evaluate the effects of the decree on the consumption of tramadol (Inj.) in the wards of a general hospital, compared to other painkillers.

Results

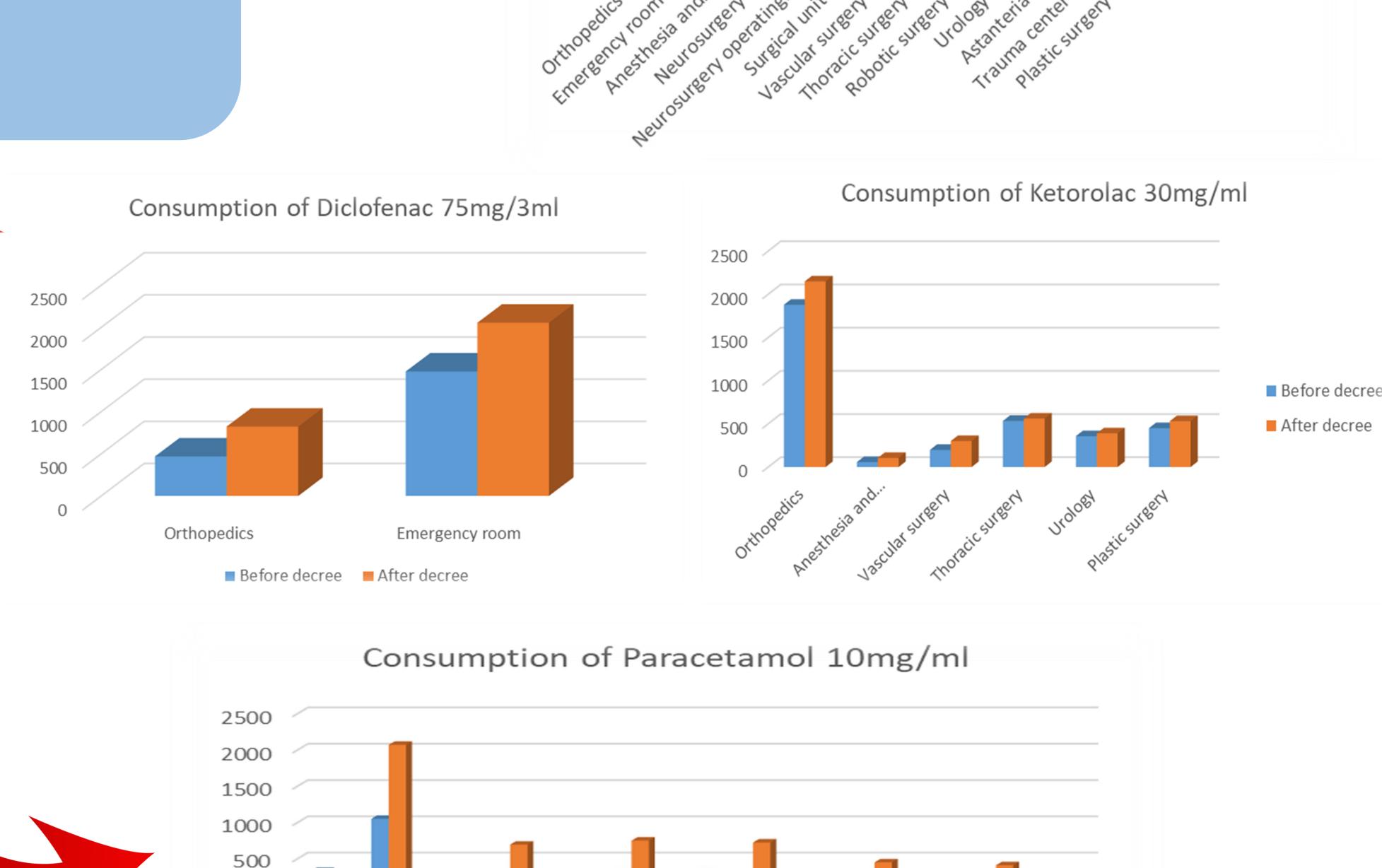
All the analyzed wards reduced use of tramadol (Inj.) Δ %:90.2; 2150 vs 210 vials.

The wards with a total reduction of consumption resulted orthopedic (Δ %:100; 760 vs 0) and emergency room (Δ %:100(555 vs 0)



Consumption of Tramadol (100mg/2ml)

- Orthopedics: +26,6% (2346 vs 2970)
 of FANS request (diclofenac e
 ketorolac)
- Emergency Room: +39,1% (1476 vs 2054) of diclofenac
- Paracetamol underwent the most significant increase in 92.8% of the wards (12/13) with a Δ%:110.6% (2810 vs 5918).



After decree

Conclusion and relevance

The decree limited the use of tramadol (Inj.). Before the drug was delivered upon simple wards request without supervision. The inclusion in the narcotics register has instead allowed the pharmacist to supervise their consumption by the wards who now have to submit a request on a specific form. This led to a discussion with the clinical on the choice of an alternative therapy in the treatment of moderate pain, moving to NSAIDs and paracetamol when possible.