

## IT'S ABOUT PAIN

### NEW CHANGES IN CONVERSION FACTORS FOR OPIOID DOSE CALCULATION

We have been notified now, by the Washington Medical Board, that the conversion factors for comparing opioid doses has been changed.

**Codeine 0.15**

**Fentanyl patch (in mcg/hr) 2.4**

**Hydrocodone 1.0**

**Methadone 4.7 (was 3)**

**Hydromorphone 5.0 (was 4)**

**Methadone 4.7 (was 3)**

**Morphine 1.0**

**Oxycodone 1.5**

**Oxymorphone 3.0**

**Tapentadol 0.4**

**Tramadol 0.2 (was 0.1)**

If you take hydromorphone or methadone or tramadol, these conversion factors make your daily dose of morphine MME, higher, even though you aren't taking any more pills. This is a "so what" from our viewpoint, but it may (WILL) create an issue with some insurance policies.

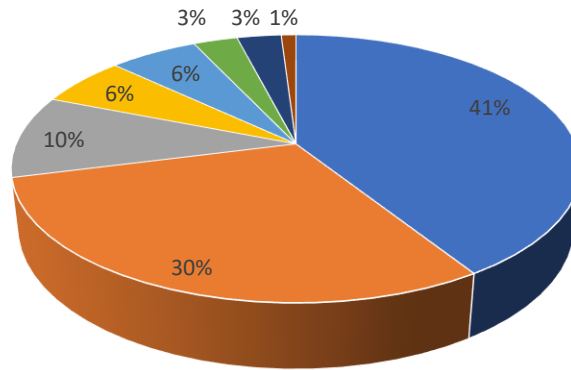
For example, if you take hydromorphone 4 mg 4x daily (16 mg), your Morphine Milligram Equivalent dose (MME, formerly called Morphine Equivalent Dose, or MED) would be  $16 \times 4 = 64$  mg. With the change, it would be  $16 \times 5 = 80$  mg. Still OK, but for 5 pills, your old MME would be 5 pills  $\times 4$  mg  $\times 4 = 80$  mg, but with the new conversion, it's  $5 \times 4 \times 5 = 100$  mg. Now you are over the 90 mg MME used by some insurances to flag us (review). Don't worry, automatically cutting down your dose would violate CDC Rules that ban forced tapering or discontinuation.

For those taking methadone, the change will be a moot point because most patients' MMEs are already over 90. Just one pill (10 mg) three times daily, totals MME 90 with conversion 3. At 4.7, that becomes 141, well above the 90. For those already on high doses, the MME will be quite a bit higher, but the response from pharmacy or insurance will likely be unchanged.

In other news, COSTCO Corporate has overruled their Northwest Pharmacy Director, and dropped our clinic. They will no longer fill any prescriptions for ANY controlled substances, which includes all sorts of medications that are not pain pills—including testosterone, Lomotil (for diarrhea), tranquilizers, sleeping pills, and even Suboxone, Subutex/buprenorphine, and Lyrica/pregabalin, which are non-narcotic options for pain control. This decision could create a variety of problems for COSTCO including violating the CDC rules on opioid prescribing, and the Americans With Disabilities Act, and a potential class action suit for pain patients who suffer great harm from being cut off. We are appealing.

Only 3% of overdose deaths in May were related to prescriptions. (pie-chart on back)

### Substances Contributing to Overdose May 2023 - May 2024



- Fentanyl
- Cocaine or Crack
- Other (non-opioid)
- Benzodiazepine
- Methamphetamine
- Alcohol
- Other/Rx Opioid (morphine, oxy, methadone)
- Heroin

State Of Washington