AMA urges doctors to check prescription databases
Proposed Calif. legislation would require checks when prescribing opioids

SACRAMENTO (July 29, 2015) – The chair-elect of the American Medical Association’s Board of Trustees is urging doctors nationwide to use their state prescription databases to combat an epidemic of overdose deaths. Dr. Patrice A. Harris, in a post on the AMA web site titled “What physicians can do to stop the opioid overdose epidemic,” tells doctors, “We should register for and consult these databases to identify patients at risk for opioid misuse and help patients with use disorders get appropriate treatment.”

California’s database is known as the Controlled Substance Utilization Review and Evaluation System, or CURES. Doctors are not required to check CURES, and few do. But SB 482, authored by Sen. Ricardo Lara (D-Bell Gardens), would require doctors to check CURES before prescribing Schedule II or Schedule III narcotics (including such potentially-addictive drugs as OxyContin) to a patient for the first time. If treatment continues, additional checks of the database will be required annually. By checking the database, doctors will be able to verify that patients are not already receiving the drugs from another provider through “doctor shopping.” Patients will still be able to receive the pain relief medications they are determined to need, in the appropriate quantity.

Databases such as CURES are also known as prescription drug monitoring programs. The AMA has established a Task Force to Reduce Opioid Abuse which it says “has been charged to empower you [doctors] to be an advocate for preventing opioid abuse and promoting appropriate prescribing. Prescription Drug Monitoring Programs are key screening tools to help determine whether to prescribe an opioid.” The AMA says more than 16,000 Americans died in 2013 from an opioid-related overdose.

“Experience in states that already require checking prescription databases has shown a dramatic reduction in ‘doctor shopping’ and a decrease in overdose deaths,” said Brian Chase, president of Consumer Attorneys of California, which supports SB 482. “The American Medical Association says doctors should consult these databases, and that’s more evidence that California doctors should be required to use CURES to improve patient safety.”

“We know that mandatory [database] checks work and save lives,” Sen. Lara said when presenting SB 482 on the Senate floor. “The current voluntary approach [in California] has not attracted enough participation to be truly effective. Ultimately this is about saving lives.”

SB 482 has passed the state Senate and will be considered by the Assembly in early 2016 to allow time for the state’s new CURES 2.0 database to fully roll out.