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College Board adopts new professional standard on safe prescribing to address public health emergency related to opioid overdoses

VANCOUVER, BC: At its recent meeting, the Board of the College of Physicians and Surgeons of BC adopted a new professional standard, [*Safe Prescribing of Drugs with Potential for Misuse/Diversion*](#), to assist physicians with the challenging task of prescribing opioids, benzodiazepines and other medications. Many of the principles contained in the new standard reflect the US Centers for Disease Control and Prevention's (CDC) *Guideline for Prescribing Opioids for Chronic Pain – United States 2016*, which the Board endorsed in April 2016.

“The Board adopted this very significant and timely document to direct appropriate prescribing of potentially harmful drugs,” says Dr. Gerry Vaughan, president of the College Board. “The new document contains both professional standards, which are not discretionary and must be adhered to, as well as recommendations for physicians to consider based on their patient’s situation and their own clinical judgement.”

The trend in British Columbia and Canada of increasing numbers of opioid-related deaths has been described most recently by BC’s Provincial Health Officer as a “public health emergency.” According to Dr. Heidi Oetter, Registrar and CEO of the College, “There are many contributing factors to this societal problem which are difficult to address, such as the criminal importation of illicit strong opioids (e.g. fentanyl and W-18). However, physicians also play a role by over-prescribing opioids, sedatives and stimulants.”

Dr. Vaughan agrees, “Unsafe prescribing needs to stop. This new document clearly states what our registrants must and must not do when prescribing certain classes of drugs, especially if there is a risk of misuse or diversion.”

Specifically, *Safe Prescribing of Drugs with Potential for Misuse/Diversion* directs physicians to have documented discussions with their patients about the benefits of non-pharmacologic and non-opioid therapies for the treatment of chronic pain. If a risk-benefit analysis indicates that opioid therapy is appropriate, then physicians are cautioned to avoid prescribing opioid pain medication and benzodiazepines concurrently, and to prescribe the lowest effective dosage with ongoing reassessment of the patient, including routine urine testing.

The document further directs that physicians review a patient’s medication history on PharmaNet (when access is available) before prescribing opioids, sedatives or stimulants. If access is not available,

physicians are expected to consult with colleagues, including pharmacists, and prescribe only necessary medications until the patient's dispensing history is available.

Currently, physicians are required to have PharmaNet access in methadone clinics, and walk-in and urgent care settings. The College Board endorses the concept of mandatory use of PharmaNet for BC physicians at all points of clinical care. The College continues to hold discussions with the Ministry of Health about enabling widespread access, facilitating the integration of PharmaNet information into electronic medical records, and supporting electronic prescribing.

[Safe Prescribing of Drugs with Potential for Misuse/Diversion](#) replaces an earlier document, which outlined precautions in prescribing opiates titled, *Prescribing Principles for Chronic Non-Cancer Pain*.

The College of Physicians and Surgeons is the licensing and regulatory body for all physicians and surgeons in the province. Governed by provincial legislation, the College's role is to protect the public by establishing, monitoring and enforcing high standards of qualification and ethical practice across the province.

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