Socioeconomic disparities in opioid use and harm among Danish breast cancer survivors

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Background

- Opioids remain important for pain management in survivorship care, but carry risk for dependence and overdose
- Denmark has historically had some of the highest opioid-prescribing rates in Europe
- Opioid use among Danish breast cancer survivors has not been well described

Methods

- Nationwide study in Denmark of 84,610 stage I−III, one-year breast cancer survivors (1997−2020)
- Assessed temporal trends in dispensed opioid prescriptions
- Examined socioeconomic patterns in opioid-related outcomes:
  - *New and prolonged use* (>1 dispensing within 6 months, >2 during 6−12 months)
  - *Long-term use* (>90 days continuous use within 1 year)
  - *Concurrent sedative-hypnotic use* (overlapping >30 days within 1 year)
  - *Opioid-related disorder or overdose* (diagnosis or fatal event within 5 years)

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Trends in opioid dispensings

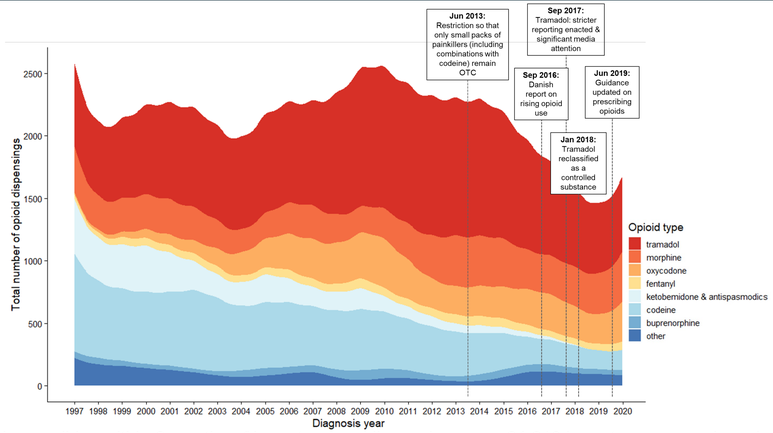


Figure 1. Trends in all opioid prescribing within 6 months of breast cancer diagnosis among 84,610 breast cancer survivors in Denmark, 1997–2020, shown in relation to national opioid policy and prescribing practice changes

Conclusions

- Harmful opioid use is rare and declining in Denmark, but social disparities persist
- System-level regulations may help, but women with socioeconomic disadvantages still need targeted support.

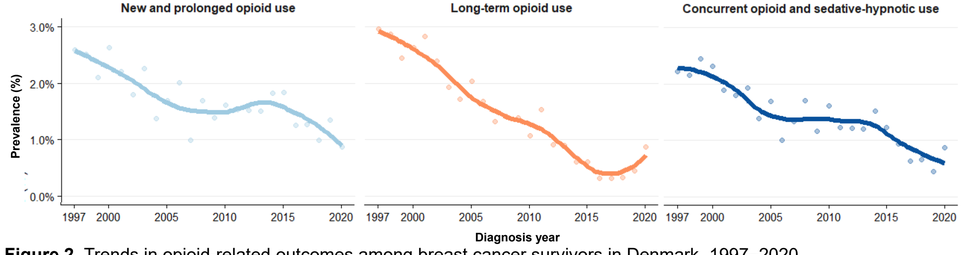


Figure 2. Trends in opioid-related outcomes among breast cancer survivors in Denmark, 1997–2020
Opioid-related disorder or overdose not shown in accordance with Danish privacy laws

Social characteristics

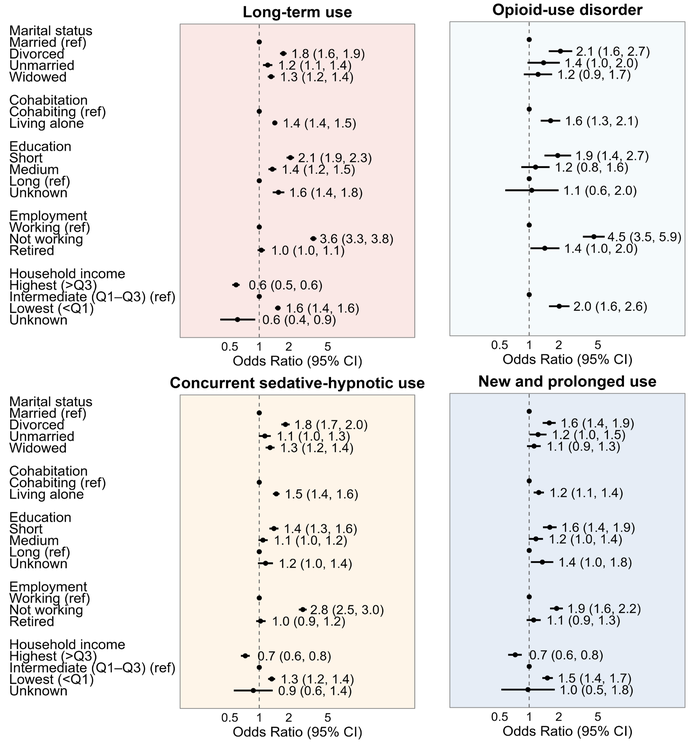


Figure 3. Associations of social characteristics with four non-mutually exclusive opioid-related outcomes among breast cancer survivors in Denmark, 1997–2020
Associations adjusted for age and calendar year of diagnosis
Abbreviations: Q, quartile

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