Potential indicators of drug-seeking behaviour or monitored medicine misuse

Fact sheet for prescribers and pharmacists (Version 2.0 – May 2024)

This fact sheet aims to assist prescribers and pharmacists in identifying potential indicators of drug-seeking behaviour or monitored medicine misuse.

Drug-seeking behaviour is not limited to users of illicit drugs or patients seeking to use their medicine for non-therapeutic purposes or divert their medicine to others. Patients displaying drug-seeking behaviour may have legitimate medical conditions but have, or are developing, a substance use disorder. Others may have undiagnosed or under-treated medical conditions.

Where there is concern a patient may be displaying drug-seeking behaviour or misusing their monitored medicine(s), prescribers and dispensers should:

- assess the level of risk of harm to the patient (and others)
- implement risk mitigation strategies proportionate to the risks identified
- avoid making assumptions about or stigmatising the patient.

Potential indicators

The identification of one or more indicators does not automatically mean a patient is drug-seeking or misusing their prescribed medicine.

It is important to assess each circumstance on its merits and to consider these indicators in the context of other factors relevant to the patient and the consultation.

Illegal activity

- Obtaining, stealing or 'borrowing' medicines prescribed to family members or friends.
- Using aliases and/or presenting with false/another person's ID to obtain monitored medicines.
- Forging prescriptions (including altering genuine prescriptions).
- Producing fraudulent documents e.g. forged letter from a 'previous doctor' or forged specialist report.
- Selling or giving away prescribed medicines to others (diversion).
- Obtaining monitored medicines from illicit sources e.g. buying off the street.

Inconsistencies

- Unable to provide a consistent and/or credible history.
- Examinations and investigation findings are inconsistent with reported symptoms e.g. claims of pain are disproportionate to apparent cause/mechanism of injury.
- Providing old medical history documentation/reports for current conditions.
- Providing reports and referrals from overseas practices that cannot be verified.

Manipulative behaviour

- Consistently disruptive when arriving at the practice/clinic.
- Frequently calling outside of clinic hours or when a particular prescriber (who prescribed monitored medicines) is on call.
- Displaying threatening or coercive behaviour or applying emotional pressure to obtain prescriptions.
- Offering bribes.
- Failing to truthfully disclose relevant information regarding history or prescription medicine or substance use.
- Fraudulently claiming to be an interstate visitor.
- Inappropriately using primary care services.

Misuse of medicines

- Taking extra, unauthorised doses of monitored medicines.
- · Hoarding medicines.
- Using prescribed medicine for non-therapeutic purposes (e.g. for euphoria).
- Injecting an oral formulation of prescribed medicine.
- Unsanctioned use of prescribed medicine to treat other conditions/symptoms.
- Obtaining (or attempting to obtain) monitored medicines from multiple prescribers for quantities beyond therapeutic need.
- Self-escalating doses of prescribed medicine.
- Using supplemental monitored medicines obtained from other sources e.g. emergency departments.
- Using prescribed medicines in any way other than as directed by the prescriber i.e. dose, route, duration.
- Using medicines obtained from family, friends or illicitly.

Physical signs

- Prescribed medicine is not present in random urine drug screens (may indicate the patient is diverting their medication).
- Presenting intoxicated or in withdrawal.
- Physical examination reveals old or recent evidence of injecting drug use.
- Deterioration at home or work or reduction in social activities because of medicine side effects.

Requests and claims

- Demanding or aggressively complaining about the need for a medicine.
- Requesting specific medicines by name.
- Claiming multiple pain medicine allergies or previous adverse drug reactions.
- Requesting private (non-PBS/RPBS) prescriptions.
- Presenting with a vague complaint (e.g. lower back pain).
- Frequently requesting early refills of prescriptions.
- Claiming to be on a surgical waiting list or unable to afford dental work and needing to manage dental pain.
- Patterns of reporting lost, stolen, misplaced, damaged or destroyed prescriptions or medicines.
- Being unable to provide identification (on request) e.g. claiming they lost or forgot their wallet.

Resistant behaviour

- Displaying anger or irritability when questioned closely about pain or other symptoms.
- Being more concerned about the medicine than the medical problem.
- Unwilling to consider other medicines or non-pharmacological treatments.
- Frequent unauthorised dose escalations after being told that it is inappropriate.
- Unwilling to sign a treatment plan, contract or agreement.
- Refusing diagnostic workups, consultations and/or clinical investigations.
- Refusing to attend specialist appointments when referred.
- Non-compliance with instructions regarding monitored medicine use.
- Repeated failure to comply with practice/clinic policies.
- Refusing to provide identification on request.

References

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Victorian Department of Health and Human Services. Prescription shoppers – scams used on doctors. Victoria: Victorian Department of Health and Human Services; 2015 [updated 8 Oct 2015; cited 2020 Aug 26]. Available from https://www2.health.vic.gov.au/public-health/drugs-and-poisons/health-practitioners/medical-practitioners/prescription-shoppers-scams-used-on-doctors.

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