A research study, funded by the NCPDP Foundation and conducted by the University of Wisconsin-Madison School of Pharmacy, has shown that use of NCPDP’s CancelRx transaction decreases the number of controlled substances, including opioids, that are dispensed to patients when their physicians intend those prescriptions to be discontinued.

CancelRx is an electronic transaction that enables prescribers to easily and quickly send an electronic message to the pharmacy to cancel a prescription that is no longer useful to a patient and may even be harmful.

In the University of Wisconsin (UW) study, physicians were required to contact pharmacies when cancelling controlled substance prescriptions. Only 47% of physicians did so before CancelRx was implemented. After CancelRx was implemented, there was an immediate increase to 100% of the physicians cancelling unintended controlled substance prescriptions. And, the increase was sustained.

An important finding for adoption of CancelRx
This is an important finding in light of the slow adoption of the CancelRx transaction. The transaction is included in NCPDP’s SCRIPT ePrescribing Standard. While SCRIPT is the industry standard for ePrescribing, its CancelRx transaction is not widely used. The UW study indicates that CancelRx can be an effective tool in the arsenal of weapons needed to combat the opioid crisis.

According to the most recently available statistics from the Centers for Disease Control and Prevention (CDC), an average of 41 people died each day in 2018, from overdoses involving prescription opioids, totaling nearly 15,000 deaths. The agency also estimates that the total economic burden of prescription opioid misuse amount to $78.5 billion annually in the U.S.

The implementation of CancelRx can prevent duplicate opioid orders at different pharmacies and medication list discrepancies between clinic EHR and pharmacy dispensing platforms. Widespread use of CancelRx would be effective in reducing the number of unnecessary opioid prescriptions available to patients, thereby increasing medication safety and potentially decreasing opioid misuse and addiction with its attendant healthcare costs.

Details of the study
UW researchers extracted data from the UW health system EHR (Epic) regarding controlled substance medications discontinued in the outpatient clinics at 12-months prior to CancelRx implementation and for 12-months post implementation. A manuscript with detailed information on the study and its findings is being prepared for publication later this year. The UW research will also be highlighted at the AMIA annual conference in November, together with a Foundation-funded Johns Hopkins Medicine research study on CancelRx.

The UW research is one of multiple examples of research funded by the NCPDP Foundation. The Foundation’s research priorities align with patient safety issues and healthcare challenges that can be overcome with the proper use of new or underused NCPDP standards.

Read More.