

HOUSE RESOLUTION

WHEREAS, The State has a considerable moral, public health, and financial interest in reducing opioid addiction in the State; and

WHEREAS, It is medically documented that opioid prescription drugs are addictive and that opioid addictions are harmful and expensive to address; and

WHEREAS, Opioid prescription drug addiction interferes with an addict's ability to work and to provide for a stable and healthy family; the State's opioid epidemic damages the health of families and children and affects the chances that a child will receive a healthy upbringing; the opioid epidemic increases crime in the State and costs the State and other entities excessive amounts of money, which is especially problematic in lean budget times; and

WHEREAS, Recent analysis by the CDC illustrates a linear association between the duration of an initial prescription and the likelihood of developing long-term opioid use; in addition, many patients who receive a prescription for opioids do not use all the medications, resulting in leftover pills that increase the risk of misuse and abuse; these factors support the need for robust safety measures around prescribing opioids for

acute, painful conditions; and

WHEREAS, Patients are not always advised of the addictive effects of opioid prescription drug use; most compelling is the 2017 analysis released by the CDC that demonstrated "the

5 likelihood of chronic opioid use increased with each additional  
6 day of medication supplied starting with the third day"; among  
7 those receiving an initial 30-day prescription, more than 30  
8 percent remained on opioids a year later; and

9 WHEREAS, In general, opioids should not be considered first  
10 line therapy for patients with mild to moderate pain and with  
11 limited past exposure to opioids; guidelines emphasize that  
12 clinicians should first prescribe non-opioid medication for  
13 acute pain and then, if needed, prescribe opioids in small  
14 quantities with duration typically limited to less than a week;  
15 and

16 WHEREAS, Requiring medical providers to inform patients of  
17 the risks associated with opioid prescription drug use can help  
18 to reduce opioid prescription drug addictions in the State;  
19 policies that reduce the number of people who become addicted  
20 to opioids will better serve citizens of the State and foster  
21 healthier families; therefore, be it

22 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE ONE

HR0058

- 3 -

LRB101 04866 ALS 50124 r

1 HUNDRED FIRST GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that  
2 we urge the Illinois Department of Public Health to adopt new  
3 guidelines for the prescription of opioid prescription drugs;  
4 and be it further

5 RESOLVED, That a suitable copy of this resolution be  
6 presented to the Illinois Department of Public Health.