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Nursing Perspectives on the Current State of the ‘Opioid Crisis’ in the Middle East: An Overview

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Abstract

Background: Limited access to opioids in the Middle East results in pain undertreatment, particularly in palliative care. However, increased opioid supply, as seen in the U.S., can lead to a crisis. This review examines the opioid crisis in the Middle East, focusing on Israel and Saudi Arabia, to inform nursing practice and policy.

Methods: A review was conducted using Web of Science, PubMed, ScienceDirect, and Google Scholar with the keywords “opioid crisis” and “Middle East.”

Findings: The opioid crisis in the Middle East differs from the U.S., with tramadol being the primary drug of concern. Israel has seen a significant rise in opioid use, especially fentanyl and oxycodone, indicating a potential crisis. In contrast, Saudi Arabia shows lower opioid misuse but has issues with overprescription and poor dispensing practices.

Discussion: The opioid crisis in the Middle East varies by country and requires tailored policy interventions. Nurses play a critical role in preventing opioid misuse through education and monitoring of patients prescribed opioids.

Conclusions: Policy recommendations include mandatory pre-prescribing education by nurses. Future research should focus on nationwide surveys to provide a representative picture of the current state of the opioid crises in various countries in the Middle East.

Keywords: Opioid crisis, Middle East, Israel, Saudi Arabia, pain management.

1. Background

A recent publication by the World Health Organization (WHO) revealed limited access to opioid medications in the Middle East region, implying pain undertreatment, especially in the context of palliative care (Erthal-Williamson et al., 2022). However, according to Vadivelu et al. (2018), one of the driving forces of the opioid crisis in the United States is the response to the undertreatment of pain, besides treatment of pain being taken as a fundamental human right. The Middle East region is undersupplied with opioids because of restrictive policies and legal barriers, which might be compounded by cultural attitudes toward opioids (Cleary et al., 2013). Therefore, there is a need for a balance between the supply of opioids and the sufficiency of pain management among the patients who need them, such as palliative care among cancer patients (Jalali et al., 2020; McDonald et al., 2024).

The push by the WHO and many other scholars to increase the supply of opioids to the Middle East region may have unintended consequences, mainly an opioid crisis, if not well monitored (Cleary et al., 2013; Vadivelu et al., 2018). Similarly, having too restrictive policies in place can hinder access to opioids to those who genuinely need them, exposing individuals to unnecessary suffering and distress (Berterame et al., 2016; Miyachi et al., 2021). Additionally, American laws and policies on opioids significantly continue to influence international opioid regulations (Miyachi et al., 2021). As a result, there are recorded fears that the opioid crisis in America, which kills almost 25,000 individuals annually due to overdose, will spread to other parts of the world (Nolan et al., 2018). Amid these fears and undersupply concerns, there is limited information on the current state of the opioid crisis in the Middle East region. Understanding the current state of the opioid crisis in the Middle East can inform nursing practice and policy change.

This review aims to explore nursing perspectives on the current state of an opioid crisis in the Middle East region, with a particular focus on Israel and Saudi Arabia. It focuses on opioid diversion, that is, the use of opioids for non-medical purposes in the Middle East. Towards the end, policy implications and nursing practice recommendations are discussed. The sources of information searched included Web of Science, PubMed, ScienceDirect, and Google Scholar. The search inputs focused on keywords like “opioid crisis” and “Middle East.”

2. Is There an Opioid Crisis in the Middle East?

2.1 The Nature of the Opioid Crisis in the Middle East

There is a unique opioid crisis in the Middle East compared to the one experienced in the United States. Most abused/misused opioids in the United States include illicitly manufactured fentanyl, synthetic opioids, and heroin (Jannetto, 2021). On the other hand, tramadol is the main drug causing opioid crisis concerns in the Middle East and West Africa (Fawzi, 2011; Klein et al., 2020). Codeine has also been outlined as one of the opioids whose abuse is rapidly rising in Africa and the Middle East (Nolan et al., 2018). However, in other Middle Eastern countries like Israel, the rising misuse of opioids like fentanyl and oxycodone has been reported (Davidovitch et al., 2023; Miron et al., 2021). Therefore, there is a need to understand the differences between countries within the Middle Eastern region. Select countries are discussed below.

2.2 The Case of Israel

In Israel, the use of opioids has increased significantly in recent years (Adler et al., 2024). Adler et al. (2024) conducted a cross-sectional study using health records of patients prescribed opioids within the past decade (2010-2020), whereby they found a 15% increase in opioid use within this period. Worryingly, the daily average opioid consumption increased by 227% between 2010 and 2020. This trend underscores a looming opioid crisis in Israel unless effective policy interventions are undertaken promptly (Davidovitch et al., 2023). This claim is supported by another cohort study that utilized data between 2003 and 2021 from the electronic health records of children and adolescents (Tuttnauer et al., 2024). They also found evidence of increasing use of opioids over the years, and more disturbingly, even among non-cancer and non-elderly patients, as also noted by Davidovitch et al. (2023) and Miron et al. (2021). Israel in the past, for example, between 2005 and 2014, recorded a general decline in opioid overdose-related deaths (Feingold et al., 2017). The recent upsurge, especially for fentanyl and oxycodone, can be attributed to Israel's policy undertakings, such as when it allowed the prescription of stronger opioids like fentanyl in 2011, which were initially banned (Davidovitch et al., 2023). Therefore, Israel generally has a unique opioid crisis compared to other Middle Eastern countries.

2.3 The Case of Saudi Arabia

In Saudi Arabia, the issue of the opioid crisis is not prevalent, but cases of opioid misuse and abuse have been reported among chronic pain patients Al Maharbi et al. (2019) used a sample of 219 chronic pain patients in a single hospital in Saudi Arabia, whereby they found that the prevalence of opioid misuse and abuse was 12.8% and 9.1%, respectively. Though the sample size was relatively small, and the focus on a single center provides limited insights into the general nature of the opioid crisis in Saudi Arabia. A more expansive study that used a sample size of 1,520 lower extremity fracture patients aged 18-64 years at five different medical centers found that more than 85% of them were prescribed opioids post-surgery, posing overprescription concerns among non-cancer patients (Ramadan et al., 2022). The authors did not report the prevalence of misuse and abuse of opioids among the patients. Nevertheless, the studies above do not offer generalizable insights into the wider context of opioid misuse/abuse in Saudi Arabia as they focus on a specific patient population. A study found that between 2008 and 2018, heroin-related fatalities in Jeddah, Saudi Arabia, remained low and relatively stable (Al-Asmari et al., 2023). Compared to Israel, opioid prescription in Saudi Arabia is generally discouraged in the healthcare system, and when used, the most common opioid used is tramadol for pain management post-surgery (Almutairi et al., 2023). However, where prescribed, opioids are poorly dispensed in pharmacies, such as the lack of counseling rooms for patient knowledge on the use and disposal of opioids, which risks opioid diversion (Ali et al., 2023). Therefore, although no data shows the current state of opioid abuse in Saudi Arabia, the current prescription practices and patterns require better prevention strategies through policy interventions to prevent the possibility of a larger crisis in the future.

3. Discussion and Conclusion

There is an opioid crisis in the Middle East despite that it presents a different nature regarding the specific drugs abused/misused, healthcare systems, and opioid policies. The findings of the review are consistent with Nolan et al. (2018) that there is a threat of an international opioid crisis. Countries like Israel, which until a

decade ago had stable opioid-related deaths, are experiencing a rapid increase in opioid misuse and abuse (Adler et al., 2024; Davidovitch et al., 2023; Miron et al., 2021). In Saudi Arabia, the opioid crisis seems to have remained relatively stable over the years, but there is no sufficient data to provide a clearer picture of the current state (Al-Asmari et al., 2023). However, with the evolving global markets compounded by the current opioid prescription and dispensation practices in Saudi Arabia, policy interventions are needed to prevent a potentially significant opioid crisis.

3.1 Nursing Implications

Nurses play a pivotal role in the prevention and mitigation of the opioid crisis. Nurses have contact with the patient before and after opioid prescription, allowing them to provide education and counseling and monitor their opioid use (Manworren & Gilson, 2015). Understanding the differences between America and the Middle East in general, as well as country differences within the Middle East region concerning the opioid crisis, can help nurses provide better interventions. For example, tramadol misuse and abuse is common in most Middle Eastern countries, whereas fentanyl abuse and misuse is expected in the United States and Israel (Davidovitch et al., 2023; Jannetto, 2021; Miron et al., 2021). Nurses practicing in a specific country should know the most misused or abused drugs for effective prevention and mitigation strategies. For example, in countries where tramadol is frequently abused or misused, before prescribing, nurses can conduct a thorough counseling session with patients to educate them about the risks of tramadol misuse, the importance of adhering to prescribed dosages, and the potential consequences of non-medical use. They can also do follow-ups to monitor the patient.

3.2 Recommendations

The main policy recommendation based on the findings is to mandate pre-prescribing education by nurses. The educational sessions should focus on safe usage, storage, and disposal. Such a strategy can potentially facilitate achieving a healthy balance between the prescription of opioids where genuinely needed for sufficient pain management and preventing an opioid crisis. The government can also provide guidelines on conducting such sessions depending on the most prescribed or abused opioid in that given country. To derive more comprehensive and robust policies, future research needs to focus on providing a complete picture of the current state of the opioid crisis in the Middle East. Limited data in countries like Saudi Arabia needs to be urgently addressed amid evolving global opioid markets. Nationwide surveys can bridge this gap.

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