



Update on the BSC/NCIPC Opioid Workgroup Formation

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Board of Scientific Counselors Meeting

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Opioid Workgroup Purpose

- Primary purpose: To review a draft, updated and/or expanded *CDC Guideline for Prescribing Opioids for Chronic Pain —United States, 2016* and to develop a report that will provide the workgroup's findings and observations about the draft Guideline to the BSC/NCIPC parent committee.
- Possible secondary purpose (on request): To provide expert input and observations on other matters related to the opioid crisis

Opioid Workgroup Tasks

- Review the quality and implications of clinical and contextual evidence reviews.
- Review each guideline recommendation statement and accompanying rationale.
- Consider specific aspects of each recommendation:
 - Quality of the evidence supporting the recommendation (assessing the accuracy of the evidence quality rating; i.e., evidence “type”);
 - Balance of benefits and risks associated with the recommendation (including the degree to which the benefits of issuing the recommendation can be anticipated to outweigh the harms);

Opioid Workgroup Tasks (continued)

- Values and preferences of clinicians and patients related to the recommendation (including the degree to which there is variability or uncertainty in values and preferences);
- Cost feasibility of the recommendation (including the degree to which implementation is anticipated to be feasible for health systems and patients financially); and
- Category designation of the recommendation (whether Category A or Category B is justified).
 - Category A recommendations apply to all patients.
 - Category B recommendations require individual decision making where different choices will be appropriate for different patients so that clinicians must help patients arrive at a decision consistent with patient values and preferences and specific clinical situations.

Opioid Workgroup Tasks (continued)

- Develop a summary report, including points of agreement and disagreement, of the workgroup's observations associated with items listed above for the draft updated/expanded 2022 Guideline.

Opioid Workgroup Nomination Process

- Nomination period opened December 4, 2019 through February 4, 2020
- 255 nominations received
- Curricula vitae reviewed
- List of prospective workgroup members created based on expertise and diversity in perspectives that would support the Opioid Workgroup's capacity to complete tasks, for example*:
 - Clinicians
 - Family members
 - Patients
 - Public health practitioners
 - Research scientists

* Order is alphabetical and not intended to signify importance or prioritization.

Opioid Workgroup Membership

- Invitations to participate sent
- Conflict of Interest Disclosure completed by prospective workgroup members
- Conflict of Interest Disclosures reviewed
- Opioid Workgroup membership finalized

Next Steps

- Convene the Opioid Workgroup members via a series of webinars, at least three times in a 12-month period to gather clinical and methodologic feedback on evidence reviews and the draft Guideline
 - Timing and topics for meetings will be planned by the Opioid Workgroup Chair and the Opioid Workgroup Designated Federal Official
 - Follow-up conference calls scheduled as needed for draft report development
- BSC/NCIPC will review the workgroup's product, discuss, deliberate and provide advice and recommendations to CDC and HHS

For more information, contact CDC
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TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

