Decreasing Opioids in the Emergency Room: Pramipexole Adjuvant Cuts Opioid Dose in Half in Acute Renal Colic Patients

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INTRODUCTION

- Renal colic is a common emergency room presentation requiring acute pain management.
- Current standard of care: opioid regimen, including morphine, when NSAIDs are contraindicated.
- Renal colic pain management is a potential area to reduce opioid use with alternative methods.
- Preclinical animal studies suggest adding Pramipexole, a dopamine-agonist typically used in Parkinson’s disease, to morphine may provide a greater analgesic effect than morphine alone.

RESULTS

Experimental and Control Arms Shows Similar Average Pain Decrease Over Time with Both 0-10 Pain Scale and Visual Analog Scale

Drug Effect Questionnaire: Experimental Arm trends LOWER Overall for All Questions

LOESS Plot Predicts Superior Pain Management with Experimental Arm

REFERENCES


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DISCUSSION

- Should the study arm see a significant decrease in these pain scores, we can conclude that Pramipexole as an adjuvant to morphine is just as effective as morphine alone in reducing acute renal colic in an emergency department setting.
- To determine Pramipexole’s broader scope of analgesic effects future studies will apply similar protocol to additional acute pain conditions.

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EARLY DATA SHOWS PRAMIPEXOLE + ½ MORPHINE TO HAVE A COMPARABLE ANALGESIC EFFECT TO STANDARD MORPHINE