



HR0058

LRB101 04866 ALS 50124 r

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HOUSE RESOLUTION

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

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

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

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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

1 acute, painful conditions; and

2 WHEREAS, Patients are not always advised of the addictive
3 effects of opioid prescription drug use; most compelling is the
4 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

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.