



May 9, 2019

CDC is engaged in a comprehensive approach in collaboration with other federal agencies and external partners to respond to the opioid overdose epidemic. In furtherance of these partnerships, particularly those targeting safer opioid prescribing, we wanted to notify you of recent updates to our [Data Resources webpage](#) and to clarify intended uses for the CDC resources that are available for morphine milligram equivalent (MME) conversion factors as a response to recently received inquiries.

- The *CDC Guideline for Prescribing Opioids for Chronic Pain—United States, 2016* (Guideline) represents an important step towards more appropriate prescribing of opioids, while ensuring that patients with chronic pain receive safer, more effective pain management. The Guideline includes a table ([see Table 2 in the Guideline](#)) specifying conversion factors for eight of the most commonly prescribed opioids in the United States, based on data available at the time of the Guideline's development.
  - To assist with clinical decision-making about opioid dosage for pain management, CDC suggests that clinicians use this published table (included also in the Guideline [mobile app](#)) or labeling as approved by the U.S. Food and Drug Administration (FDA). For currently licensed opioid medications with labeling that does not include information regarding conversion factors, CDC suggests that in keeping with common practice, clinicians consult with colleagues having expertise and experience in pain management.
- CDC also maintains an additional resource called the oral MME file, which was developed for, and remains intended for, analytic, research purposes. This file provides National Drug Codes and estimated MME conversion factors for opioid medications.
  - To assist in analyzing prescribing data for research or surveillance purposes, CDC suggests that research analysts use this file. For example, the file might be used with medical claims or prescription drug monitoring program (PDMP) data to assess the amount of opioids dispensed to patients at a population level for surveillance purposes, or to assess how the amount of opioids prescribed to patients is associated with outcomes such as opioid use disorder or overdose. The full oral MME file is an important tool in epidemiologic studies. However, it is not intended for clinical application.

We understand that the opioid overdose epidemic is increasingly complex and that response efforts, particularly around safer opioid prescribing, have greatly accelerated over the past few years. For example, PDMPs have been integral in advancing public health priorities around safer prescribing. CDC aims to continue to support these efforts while also providing appropriate tools for various audiences. We appreciate your partnership in helping to reverse the opioid overdose

epidemic. If you have any additional questions about the intended application of these tools, please feel free to contact us.

Sincerely,

A handwritten signature in black ink, appearing to read "Grant Baldwin". The signature is fluid and cursive, with the first name "Grant" and last name "Baldwin" clearly distinguishable.

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