

Module 8

AS 10/19/07 1

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All About Opioids


Among the many treatments that are available to help relieve moderate-to-severe chronic pain, opioid analgesics are the most widely prescribed type of medication. [AHCPR/p37/¶2] This is because opioid analgesics are usually effective and because there are so many different types, they offer flexible ways to take them. [AHCPR/p37/¶2]

Different formulations for different people

Opioid analgesics come in short- and long-acting formulations, some are more potent than others, and some start working faster than others. [ACPA/p14/¶2+3] These differences make individual opioid analgesics suitable for treating certain types of pain. Some are better for use around-the-clock to treat persistent pain (pain that is always present), and others are better for treating different types of breakthrough pain. [ACPA/p14/¶3]

Opioid analgesics are also available in a wide variety of delivery systems including tablet, lozenge, capsule, liquid, suppository, skin patch, nasal spray, injection, implantable pump, and patient-controlled analgesia (PCA) pump. [AHCPR/p40/¶1-p43/¶3] These various methods of delivery exist to help ensure that everyone who needs opioid analgesia can get the treatment he or she needs.

Safety and side effects

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Opioid analgesics may cause some side effects including constipation, nausea, confusion, tiredness, rash and difficulty breathing. [AHCPR/p37/¶3] Some of these side effects may occur more often in people over 70 years of age, in men compared to women, and in blacks compared to whites. [Swegle/p1347/c1/¶2+3-c2/¶1] Fortunately, these side effects can usually be managed, and in many cases, your health care professional can help you avoid them.

[Swegle/p1347/c2/¶4;p1348/c1/¶4-c2/¶1;p1350/c1/¶2+c2/¶2-4;p1353/c1/¶1]

Opioid addiction is rare in people with chronic pain

People are sometimes nervous about taking opioid analgesics because they are afraid they will become addicted. [ACPA/p18/¶2] Addiction rarely occurs in people who take opioid analgesics as prescribed for chronic pain.

[AHCPR/p38/¶1-3]

Addiction is when a person: [ACPA/p18/¶2]

- Has an irresistible craving for a certain type of drug
- Loses the ability to control the use of a drug and takes it without following the prescribed orders (usually seeking and taking the drug in greater quantity and more frequently)
- Uses a drug even in the face of harmful consequences, such as losing friends and family or one's job

Some symptoms look like addiction, but they are not

2
 suggest
 ↓ adding
 dizziness
 vomiting
 sleepiness

2 = fatigue?

Even though addiction is rare in people who take opioid analgesics for chronic pain, it can occur. Addiction can happen with opioids because they affect certain chemicals in the brain that can make a person feel like they “need” the drug, much like the way a person needs food. However, some symptoms may look like addiction even though they are not. These symptoms include tolerance, physical dependence, and pseudo (or false) addiction.

- **Tolerance**

After taking opioid analgesics for awhile, some people find that they need more medication to get pain relief. [AHCPR/p38/¶1-3+5] This is not a sign of addiction. It is called tolerance. Tolerance is when you need increasing amounts of an opioid analgesic to control your pain. Sometimes the need for more pain medication may indicate that the disease causing your pain is getting worse. [AHCPR/p38/¶5] For this reason, you should tell your health care professional if you feel that you need more pain medication to maintain your pain relief so he or she can review your overall health status.

- **Physical dependence**

In some cases, opioid pain medication needs to be stopped or the dose decreased rapidly because of another medical treatment. [AHCPR/p38/¶4] Sudden stoppage of the drug may also happen when your opioid analgesic interacts with another drug you may be taking. [ACPA/p18/¶4] When you suddenly stop taking the drug, you may feel anxious or upset. You may also have hot flashes or chills, feel pain in your joints where you did not

feel pain before, or experience other symptoms such as tearing eyes, stuffy nose, nausea, vomiting, stomach cramps, or diarrhea. [AHCPR/p38/¶3]

These are not signs that you have become addicted to your opioid medication. It means that your body has become physically dependent on it. [AHCPR/p38/¶1-3] Physical dependence (also sometimes called withdrawal) is when your body shows signs of illness or discomfort when the drug is no longer available. [ACPA/p18/¶3] Physical dependence is normal in any person who takes certain types of drugs for a long time. [ACPA/p18/¶4] If your dose of opioid analgesic needs to be stopped or reduced, your health care professional may prescribe a specific schedule of tapering (gradually reducing the amount and frequency) of the drug dose to help avoid or minimize the symptoms of withdrawal. Sometimes drug withdrawal requires admission to a facility that specializes in this process and offers around-the-clock comprehensive medical support.

- **Pseudoaddiction**

When pain management is not as effective as it could be, it can cause some people with chronic pain to act out in ways that they normally would not if their pain was under control. [ACPA/p19/¶4] These behaviors may include taking pain medication more often than prescribed by a health care professional, or taking higher doses than prescribed in an effort to get better pain relief. [ACPA/p19/¶4] These may seem like the actions of an addict, but they are not. They are the actions of a person who is still in pain despite their treatment. If you find that your pain treatment is no longer as

effective as it used to be, do not start taking more medication or medication more often on your own. Do not self-medicate with other pain relievers or illicit (illegal) drugs and alcohol. Talk to your health care professional first so he or she can reassess your condition and prescribe a dose adjustment to help you get better pain relief.

Honesty is the best care

In order to provide the best possible care, your health care professional needs to know what is going on. He or she needs to have an open, honest and respectful dialogue with you at all times about your pain and whether it is being controlled. This is particularly important when you are taking opioid analgesics because they are controlled substances. [FSMB/p3/¶2] That means that they are regulated by federal and state laws that carefully restrict their use. [USDEA/p8/¶6]

Health care professionals, including those who prescribe opioid analgesics and the pharmacists who dispense them, are responsible for making sure the opioid medication you are taking is being taken as prescribed. [USDEA/p8/¶6] The bond that you develop with your health care professional is vital for ensuring that you receive the best possible treatment for your chronic pain.

Everyone has a right to effective pain relief

When being open and honest with your health care professional, be sure to tell him or her if you have ever used illicit drugs or if you use illicit drugs now. This does not mean that your health care professional will not provide an opioid

analgesic for your chronic pain if that is what is appropriate. It is particularly important to know because drugs can interact with one another and cause possible serious side effects. [ACPA/p5/¶3]

Everyone has a right to be treated appropriately for their pain, [APF/p1/c1/¶1+Bullets 1+2] and your health care professional is committed to doing everything he or she can to help. [FSMB/p2/¶7] To help ensure that your pain management needs are being met, and that the laws concerning the use of opioid analgesics are also being met, your health care professional will need to thoroughly document everything related to your care. [FSMB/p3/¶4] He or she will do this regardless of whether or not you have a history of illicit drug use to help ensure that every person is treated fairly and with respect. [Gourlay/p111/c2/¶2] Doing so will also help ensure that every person receives the best possible care so they can lead happier and more productive lives.

Ask your health care professional about other modules in this series. For additional information about opioid analgesics, visit these resources:

- American Pain Foundation
<http://www.painfoundation.org/Library/OpioidTherapyforChronicPain.pdf>
- American Pain Society
<http://www.ampainsoc.org/advocacy/opioids.htm>

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