Opioid Medicine for Chronic Pain

What are opioids?
Opioids are powerful medicines that a doctor can prescribe to help manage severe pain. They are sometimes called narcotics or opiates.

Examples include hydrocodone (Vicodin, Norco), oxycodone (Percocet, Oxycontin), tramadol (Ultram), morphine (MS Contin), codeine (Tylenol #3), oxymorphone, fentanyl (Duragesic), buprenorphine (Subutex), methadone. They can be prescribed as pills, patches, films, liquids, or injectables.

These medicines are prescribed for chronic (long-term) pain only after other treatments have been tried without success.

Will opioid medicine help my pain?
There is limited evidence that opioids effectively manage chronic pain. Opioids usually do not take away all of the pain. They may help with pain, but they may also make pain worse over time. Opioids may improve function and quality of life, but they may also lead to worse function and quality of life due to ongoing side effects. How the medicine will affect you depends on your unique situation.

Do opioids put me at risk?
Yes. Prescription opioids can be dangerous and life threatening when:

• Combined with other medicines or when taken alone.
• Taken differently than prescribed or taken exactly as prescribed.
• The dose is high or the dose is small.

Refer to the table at right for risk factors that may apply in your specific case.

Are opioids right for me?

My chronic pain diagnosis:____________________

Treatment options
Work with your provider to develop a treatment plan that includes one or more of these options:

<table>
<thead>
<tr>
<th>Have tried</th>
<th>Want to discuss</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>Chronic pain self-management class</td>
</tr>
<tr>
<td>☐</td>
<td>Cognitive behavioral therapy provided by a mental health specialist</td>
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<tr>
<td>☐</td>
<td>Over-the-counter pain medicine</td>
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<tr>
<td>☐</td>
<td>Medicines that treat other conditions, such as depression, anxiety, or seizures</td>
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<tr>
<td>☐</td>
<td>Physical therapy and exercise programs</td>
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<tr>
<td>☐</td>
<td>Managing other health conditions, such as diabetes or arthritis</td>
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<tr>
<td>☐</td>
<td>Working with a pain specialist</td>
</tr>
<tr>
<td>☐</td>
<td>Other treatments, such as yoga, mindfulness, and meditation</td>
</tr>
</tbody>
</table>

Factors that could increase your risk
Talk with your prescribing provider if you:

☐ Have sleep apnea or snore
☐ Are pregnant
☐ Take other medicines (discuss everything you take with your prescribing provider)
☐ Have problems with depression, anxiety, or another mental health condition
☐ Have ever attempted suicide
☐ Have other medical conditions, such as lung disease, heart disease, or obesity
☐ Have misused, overused, abused, or been addicted to any substance, such as alcohol or opioids
☐ Use (or have used) tobacco or illegal (street) drugs
☐ Have ever overdosed on any medicines, including opioids
☐ Have used naloxone to reverse an overdose
☐ Have a family member who misuses prescription medicines, street drugs, or alcohol
☐ Drink alcohol while taking opioids
What are the risks of opioids?

Risks related to taking opioids include:

- **Decreased breathing** (respiratory depression) can cause sudden death. This is the most serious risk. This is true for everyone, but is even more common in people who are obese or have sleep apnea or lung disease.

- **Overdose**, which can be life threatening.

- **Hyperalgesia** [HI-per-al-JEE-see-uh], which means becoming more sensitive to pain over time.

- **Tolerance**, which means you need more and more of the medicine to get the same level of pain control.

- **Physical dependence**, which means having withdrawal symptoms when you stop taking opioids.

- **Misuse**, which means taking opioids for reasons other than pain or taking more than prescribed.

- **Addiction**, which is a disease that leads you to use crave opioids (use them compulsively) even though they could be harming you.

**Risks related to other health conditions include an increased risk of:**

- Getting infections.
- Getting pneumonia.
- Developing sleep apnea or the condition getting worse.
- Having complications during pregnancy that could harm you and your baby. Be sure to talk with your OB/GYN, family medicine doctor, and pain management doctor if you either become pregnant or are just thinking about becoming pregnant while taking opioids.

What are the side effects of opioids?

If at any time you feel the side effects are greater than the benefits, or the opioids are not controlling your pain well enough, talk with your provider.

**Physical side effects include:**

- Constipation (ask your doctor or pharmacist how to treat this)
- Sleepiness, tiredness, or dizziness
- Difficulty sleeping (insomnia)
- Nausea, vomiting, or dry mouth
- Itching or sweating
- Difficulty urinating (peeing)
- Slower reactions (physical and mental) that can reduce alertness or judgment and cause accidents such as crashes, falls, or work injuries
- Pain worsening over time
- Low levels of testosterone (a hormone), which can result in:
  - Thinning of the bones (osteoporosis) and greater risk of fracture, weight gain, loss of muscle strength, and hair loss
  - Lower sex drive, energy, or strength. In men, this may cause difficulty getting and maintaining an erection. In women, it may cause vaginal dryness.
- Decrease in cortisol (a hormone), which can impact your body’s ability to respond to stress and recover from infection
- Weakness
- Headaches
- Seizure
- Abdominal cramps
- Missed menstrual cycles
- Flushing
- Altered taste, vision, heart rate, or blood pressure
- Shaking, twitching, or sudden jerky movements

**Mental and emotional side effects include:**

- Mental status changes (confusion, disorientation)
- Depression and anxiety
- High feelings or low feelings
What about withdrawal?

If you stop taking opioid pain medicine suddenly, you can have withdrawal symptoms. For most people, this can be very uncomfortable but is not dangerous. However, withdrawal can be life threatening to someone who is in poor health or to a newborn baby born to a mother taking opioids.

The length of withdrawal varies from person to person. Symptoms can include nausea, vomiting, dehydration, cramps, diarrhea, body aches, fever, sneezing, increased pain, restlessness, irritability, yawning, runny nose, goose bumps, fast heartbeat, increased blood pressure, weakness, and sweating.

If you are going through withdrawal, make sure to call your doctor and to drink plenty of water.

To prevent withdrawal, be sure to:

• Not stop taking opioid medicine suddenly unless you discuss this with your prescribing provider first.

• Avoid running out of your medicine early. Do not take more than prescribed. Do not give your medicine to others.

• Refill your prescription on time. Note: You need to request refills during regular business hours. It usually takes 2 to 3 business days to fill a request. On-call doctors usually do not give refills.

How do I lower my risk?

Prescription opioid use is usually started on a trial basis. This allows you and your prescribing provider to assess pain relief, side effects, quality of life, and function before deciding whether to continue opioids.

Before you start taking opioids:

• Talk with your prescribing provider about your personal goals for reducing your pain and improving your functioning. Together, you will decide if the medicine is helping or if other treatments would be better for you.

• Give your prescribing provider a list of everything you use including prescriptions, inhalers, over-the-counter medicines, vitamins, patches, herbal remedies, and marijuana, or other drugs.

• Tell your prescribing provider if you have signs of sleep apnea. These include snoring louder than you speak, daytime tiredness, or falling asleep while driving. Ask your family or friends to tell you if you hold your breath for more than a few seconds while sleeping. Sleep apnea increases your risk for overdose or death.

• Talk with your prescribing provider and pharmacist about your opioid prescription. Ask questions. Be sure you understand what you’re taking, why you’re taking it, and how to take it.

• Ask your prescribing provider about naloxone. This fast-acting medicine could save your life if you take too much of an opioid. Note: Not all overdoses happen because of overuse or misuse. Overdoses can happen from interaction with another medicine or from changes in your body.

While you’re taking opioid medicine:

• Keep track of when you took your last dose. It’s easy to forget when you took your last dose as opioid medicine can increase confusion. Keep a written log where you can see it. If you have difficulty thinking or dementia, get someone to help you manage your opioid medicine.

• Tell the people you live with that you’re taking a medicine that can affect your breathing. Tell someone you trust how to recognize an overdose and how to use naloxone to save your life if needed. Ask your prescribing provider for the handout Naloxone for Opioid Overdose, which explains what to do.

• Never take more opioid medicine than prescribed. Even if you feel worse, never take a higher dose. Never take the medicine more often. You could die.

• Do not crush, chew, or alter the medicine in any way unless your prescribing provider tells you to. Altering the medicine can increase the risk of death.
• Tell your prescribing provider if you are taking sleep aids (such as Ambien) or anti-anxiety medicine, such as diazepam (Valium) or alprazolam (Xanax). These may raise your risk for decreased breathing and sudden death when taken with opioids. This is true even if a healthcare provider has given you permission to take them.

• NEVER drink alcohol or take illegal drugs while taking opioids. These raise your risk for decreased breathing and sudden death.

• Do not drive a car or operate dangerous machinery until you are know how the medicine affects you. Opioids can slow your reflexes and affect your judgment, and you may not realize it. You could hurt yourself or others, and you could get a DUI charge.

• Keep the medicine in a bottle that has correct labeling. The label gives you the information you need, and the bottle protects the pills from light. In some cases, it may not be a good idea to carry all your pills all the time. You can ask the pharmacy to put them in smaller bottles with correct labeling.

• Get your opioid prescriptions from only 1 healthcare provider and 1 pharmacy. In an unusual situation when you have to go to a different doctor, tell your original prescribing provider right away. Never get opioid medicine from anyone who is not a healthcare provider.

• Manage constipation caused by opioids. Stay physically active, and drink plenty of water. If you have constipation, tell your healthcare provider.

• If you need to have surgery, tell your opioid prescribing provider. They may tell you to cut back or stop your opioids in the weeks before surgery. This can help control your pain after surgery. Ask before and after surgery about the plan to manage pain, and make sure that you have good instructions.

How do I prevent an overdose in others:
Protect those around you by doing the following:

• Lock up your opioid medicine where it’s safe. Don’t keep it in open places where others can find it. Children and pets can easily die if they take your opioid medicine.

• Do not sell or share your pain medicine with anyone, even if that person has pain. Selling or sharing opioid medicine is dangerous and illegal.

• Dispose of leftover medicine at a drug collection site, such as any Intermountain Healthcare Community Pharmacy. You can also find drop-off sites at useonlyasdirected.org. Unused pills can tempt others, which can lead to misuse.

Working together to lower your risk
If you decide to try using opioid medicine for your pain, you and your healthcare providers must work together to lower your risk.

• Your healthcare providers may ask you to come in more often to see how the medicine is affecting you. They may do extra health assessments and screenings.

• You will need to sign a document that outlines your responsibilities and commitments while taking opioids. This is called a Medication Management Agreement (MMA).