# HEALTHYLIVING PRIMARY CARE What You Need To Know About Opioids

Living with chronic pain can be devastating, and effective pain management is important to getting your life back. It is essential that you and your doctor discuss treatment options, carefully considering all the risks and benefits. Some medications, such as prescription opioids, can help relieve pain in the short term but also come with serious risks and potential complications—and should be prescribed and used carefully.

# What is the Difference Between Acute Pain and Chronic Pain?

**Acute pain** usually starts suddenly and has a known cause, like an injury or surgery. It normally gets better as your body heals. **Chronic pain** is pain lasting 3 months or more and can be caused by a disease or condition, injury, medical treatment, inflammation, or even an unknown reason.

# What are Opioids?

Opioids are natural or synthetic chemicals that reduce feelings of pain. Common prescription opioids include:

- Hydrocodone (Vicodin<sup>®</sup>)
- Oxycodone (OxyContin<sup>®</sup>)
- Oxymorphone
- Codeine
- Tramadol
- Morphine
- Methadone
- Fentanyl

# **Are Opioids Necessary?**

Prescription opioids can be used to treat <u>severe acute pain</u>, but there is **NO** evidence that they are as effective for long-term use. If you're prescribed an opioid, the best approach is to try the <u>lowest possible dose in the smallest quantity</u>. Opioids should only be used when necessary and only for as long as necessary. Generally, for acute pain this is often **3 days** or less; more than 7 days is rarely needed.

### Will I Get Addicted to Opioids?

Anyone who takes prescription opioids <u>can become addicted to them</u>. You may also develop *tolerance*—meaning that over time you might need higher doses to relieve your pain, putting you at higher risk for a potentially **fatal overdose**. You can also develop *physical dependence*—meaning you have withdrawal symptoms when the medication is stopped.

#### Can I Avoid Side Effects and Risks?

No. Opioids pose a risk to all patients. Anyone taking prescription opioids is at **risk for unintentional overdose** or **death** and can become **addicted**. From 1999 to 2016, more than 200,000 people died from overdose related to prescription opioids in the United States.<sup>1,2</sup> Up to 1 out of 4 people receiving long-term opioid therapy in a primary care setting struggles with opioid use disorder.<sup>3,4,5</sup>

In addition to the serious risks of opioid use disorder and overdose, the use of prescription opioids can have several side effects, even when taken as directed. Review these with your doctor, so you know what you may expect:

- Tolerance—needing to take more of the medication over time for the same pain relief
- Physical dependence—experiencing symptoms of withdrawal when the medication is stopped
- Increased sensitivity to pain
- Constipation
- Nausea and vomiting
- Dry mouth
- Sleepiness and dizziness

Source: Centers for Disease Control and Prevention, and National Center for Injury Prevention and Control, Division of Unintentional Injury Prevention

- Confusion
- Depression
- Low levels of testosterone that can result in lower sex drive, energy, and strength
- Itching
- Sweating

## What Increases My Risk of Overdose from This Medication?

It is <u>very dangerous to combine opioids with other drugs</u>, especially those that cause <u>drowsiness</u>. Risk of opioid overdose and death increases at higher dosages, and when taken for longer periods of time or more often than prescribed.

# Overdose risk increases when your opioid medication is combined with:

- Alcohol
- Benzodiazepines (also known as "benzos," including diazepam (Valium), alprazolam (Xanax), clonazepam (Klonipin), temazepam (Restoril) and lorazepam (Ativan))
- Other sedatives
- Other opioids (prescription or illicit, including marijuana/cannabis/CBD, heroin)

# What You Can Do to Prevent Opioid Misuse

- 1. Work with your doctor
  - Work with your doctor to create a plan on how to manage your pain.
    - o Know your options and consider ways to manage your pain that do not include opioids.
    - o Talk to your doctor about any and all side effects and concerns.
    - o Make the most informed decision with your doctor.
  - Follow up regularly with your doctor.
- 2. Take and Store Opioids Properly
  - Never take opioids in greater amounts or more often than prescribed.
  - Never sell or share prescription opioids with other people.
  - Store prescription opioids in a secure place, out of reach of others (including children, family, friends, and visitors).
  - If you have unused prescription opioids at the end of your treatment, find your community drug take-back program or your pharmacy mail-back program, or flush them down the toilet, following guidance from the Food and Drug Administration (www.fda.gov/Drugs/ResourcesForYou).
  - **DO NOT** take opioids with **alcohol** and other medications like:
    - o Benzodiazepines (such as Xanax and Valium)
    - Muscle relaxants (such as Soma® or Flexeril®)
    - Hypnotics (such as Ambien or Lunesta)
    - Other prescription opioids

## What is the Opioid Prescribing Guideline and How Does it Affect Me?

CDC developed the <u>Guideline for Prescribing Opioids for Chronic Pain</u> to help primary care providers make informed prescribing decisions and improve patient care for those who suffer from chronic pain (pain lasting more than 3 months) in outpatient settings. The guideline is not intended for patients who are in active cancer treatment, palliative care, or end-of-life care.

If you have chronic pain and are prescribed opioids as part of your treatment, your doctor should monitor you regularly. This might include extra assessments, a pain treatment plan, more frequent office visits, and urine testing. Prescription opioids can be very dangerous if not used properly. Make sure to follow all your doctor's recommendations.

I have read and understand the contents of this FAQs. All my questions have been answered to my satisfaction.

Name Signature Date