

Opioid Fact Sheet

Pain Management Unit

This handout provides information to consumers with chronic non-cancer pain about morphine-like medications (opioids), their potential risks and benefits. Opioid medication may be recommended as part of your pain management plan.

What part do opioids play in the management of chronic pain?

Opioids have a limited role in the management of chronic pain. Chronic pain is pain that lasts longer than three months. While opioids can control acute pain (pain that you might experience from recent trauma or surgery) to a large extent, when used for chronic pain management the expected reduction in pain is approximately 20% to 30% at the beginning of the treatment period. This reduction in pain can enable chronic pain patients to take a more active role in their chronic pain management.

What are the potential risks of taking opioids to manage chronic pain?

- The benefits of opioids often lessen over time. This is known as **tolerance**. Sometimes changing to a different opioid can help maintain pain reduction benefits.
- If opioids are combined with other substances such as alcohol and/or benzodiazepines such as Valium and Temazepam the sedative effects are harder to manage.
- In certain instances, when used in high dosages, opioids can actually make pain worse. This is called **opioid-induced hyperalgesia**.
- **Dependence and addiction can be substantial problems when using opioids.** Everyone taking opioids long-term becomes physically dependent, meaning they will experience withdrawal symptoms if they suddenly stop taking opioids. A small number of patients treated for chronic pain with opioids will become addicted to them.
- If you are pregnant while on opioids to manage chronic pain your baby may require treatment for opioid withdrawal after birth.

Side effects of opioids may include:

driving impairments	nausea or vomiting	sedation/drowsiness
constipation	itch	sexual dysfunction
falls	weight gain	sleep disturbance
breathing problems	mental clouding / brain fog	sweating
dry mouth	osteoporosis	

Practical Issues:

- Opioids are most effective if used short term as part of a pain management plan rather than as a stand-alone therapy.
- If treatment with opioids is recommended, we will suggest to your general practitioner that you begin by trialling opioids. We will then work together with you and your general practitioner to check your response before we decide, with you, whether to begin a period of long term opioid therapy. This decision will involve weighing up benefits and side effects of long term opioid treatment for you as part of your chronic pain management plan.
- If you are on long term opioid treatment, you will need to see your doctor regularly to discuss your progress and to address any side effects.
- Random urinary drug testing is commonly used as part of opioid treatment to monitor opioid and other substance usage.

Opioid Toxicity

If you become very confused and/or drowsy or are breathing very slowly please seek immediate medical treatment.

In an emergency call “000” for an ambulance

Carer Alert

If someone close to you cannot seem to wake up, becomes very confused and/or drowsy, is breathing very slowly, passes out or has a seizure, please seek immediate medical treatment.

In an emergency call “000” for an ambulance

Storage and Disposal:

It is important to securely store these medications away from **children**. Store **opioid medication** in a cool, dry place. Return any expired, unused and unwanted **opioid medication** to your local pharmacy.

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