

Opioids for Persistent Pain

Patient Information Leaflet

April 2018

What are opioids?

Opioids are strong medicines that are widely used in moderate to severe pain. Examples include morphine, fentanyl, oxycodone, codeine, tramadol and buprenorphine.



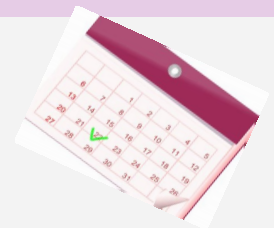
What are opioids used for?



Opioids can be helpful for acute short-term injuries and cancer related pain. However, medicines generally, and opioids in particular, are often not very good at treating long-term or persistent pain. If you've been using opioids for a long time, you and your doctor may want to review the benefits and the risks of these medicines for your condition.

Taking opioids long-term

While opioids can have a benefit for some people living with long-term pain, they can also cause serious harm. It is important to discuss the risks and benefits of continuing to take opioids with your doctor regularly. Studies suggest that risks to your health increase if you take opioids at high doses for a long period of time.



What are the Risks?

Some of the risks of using opioids for many months include:



- ◆ Hormone changes – this can cause problems with fertility (difficulty getting pregnant), low sex drive, erectile dysfunction in men and irregular periods in women.
- ◆ Increased levels of pain – opioid medication aimed at helping you to manage your pain may make you more sensitive to pain and can actually make your pain worse.
- ◆ Reduced ability to fight infection – your immune system may not work as well as it should.
- ◆ Memory problems – opioids can shut down one part of your brain whilst causing the emotional part of your brain to become more active. This can lead to memory loss, mental foginess and cause you to have less energy.
- ◆ Tolerance - you can get used to opioids, so that you need more and more to have the same effect. This is called building up tolerance. However, we know that high doses of opioid medicines taken for long periods are unlikely to give better pain relief and are associated with a number of risks, many of which are listed here.
- ◆ Addiction – you are at risk of addiction even if you are using your opioid medication responsibly. Your risk of becoming addicted to opiates can increase if you use tobacco, alcohol, other addictive substances, and/or have a family history of addiction.

Reviewing your use of opioid medicines

- ◆ Taking medicines is only one part of effective pain management.
- ◆ It is usually not possible to take away your pain completely.
- ◆ Only about 1 in every 5 people will benefit from medicines that are prescribed for long-term pain and on average, they will only reduce your pain by about 30%.
- ◆ **The aim of treatment is to reduce your pain enough to help you get on with your life.**
- ◆ To make sure that the opioids you are prescribed are still the best option, they should be reviewed at regular intervals. This may include reducing your dose every so often to make sure they are still working for you.
- ◆ Many people find they can reduce their opioid dose without increasing their pain. This can reduce side effects and improve quality and enjoyment of life.



What else can I do?



- ◆ Pain medicines work best if you combine them with other ways of managing symptoms such as regular activity and exercise, and doing things that are satisfying or enjoyable, such as work or study, and social activities.
- ◆ Setting goals to help improve your life is an important way to see if your drugs are helping. Try to set small achievable goals which may have a positive impact on your life or improve your health.
- ◆ Ask yourself, do your medicines help you to achieve the goals? If they don't help you to work, rest or play is there any point in taking them?
- ◆ A pain management programme can make a huge difference to how well you manage the physical and emotional impact of living with persistent pain and help you get on with your life. If you think this may benefit you, please discuss with your GP or pharmacist.

Where can I get help?

If you would like to discuss any information contained in this information leaflet, please speak to your doctor or pharmacist.

