Do I Need an Opioid Prescription?

- Opioid based analgesics are reserved for short term use following a severe injury, illness, or surgery
- Opioids are prescribed too often.
- Chronic pain is one of the most common reasons people see their health care provider. However, for most types of chronic pain, opioids should only be used as a last resort.
- Short-term use of these medicines may help. But there is no proof that they work well over time. Long-acting or extended-release opioids are rarely appropriate.

If you have moderate to severe <u>back pain</u> or <u>neck pain</u> expect your physician to use other pain treatments that work **better** and have fewer risks:

- Over-the-counter medicines:
 - Acetaminophen (Tylenol® and generic)
 - Ibuprofen (Advil®, Motrin IB®, and generic)
 - o Naproxen (Aleve® and generic)
 - Topical non-steroidal antiinflammatory drugs (NSAIDs):
 - Heat rubs
- Non-Drug treatments:
 - o Exercise/activity
 - Self-treatment methods
 - Manual therapies/Spinal manipulation
 - Massage therapy/Acupuncture
 - o Cognitive behavioral therapy
 - Injections (such as steroids)

- Other prescription drugs:
 - Non-steroidal anti-inflammatory drugs (NSAIDs)
 - o Anti-seizure drugs
 - o Gabapentinoids
 - o Antidepressants

An opioid is only considered to be an effective treatment if you have <u>exhausted all</u> <u>other viable medication and non-</u> <u>medication options.</u>

Before your doctor prescribes an opioid pain reliever, he/she will likely evaluate your current medical condition by performing a physical and neurological examination. The assessment focuses on your pain—including the location, intensity, frequency, and treatments you've tried.

Potential Side Effects of Opioids

- Constipation
- Drowsiness
- Itching
- Nausea
- Vomiting
- Chemical dependence
- It's quite common for people to develop a tolerance to opioids, which requires increasing the dose to help deliver better pain relief.
- "Rebound" increased severity of pain
- Overdose and death