

The Pain Management Service



Reducing and Discontinuing Opioids with Persistent Pain

Information for you



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There is a large and increasing body of scientific evidence which shows that opioids are not effective in helping long-term pain. These powerful drugs can have significant side effects and may even cause harm. This booklet is to give you some information about this.

What are opioids?

Opioids are a group of medications which work by interacting with the opioid receptors in the body. Opioids can either be made from extracts of opium poppy seeds or produced in a laboratory (synthetic and semi-synthetic).

Opioids include drugs such as: morphine; codeine; dihydrocodeine; tramadol, oxycodone, diamorphine and fentanyl. These can come in tablet, capsules, liquids or patches and may sometimes be combined with other pain relieving drugs such as paracetamol.

Why is there a need to change?

There is increasing information available that long term opioid use is not helpful in chronic pain and often reduces how well people function and reduces their quality of life. Opioids are helpful for short term (acute) pain and give relief at first – for example when you are injured or require an operation. Over time the pain relieving effects of the opioid lessen but the side effects do not. This is known as developing tolerance. People can end up on very high doses of opioids and still be suffering from the pain as well as unpleasant side-effects.

Worldwide, there are enormous problems with the overuse of opioids. America in particular is facing huge issues with patients prescribed opioids for long term pain. Patients are struggling with their medication and showing signs of addiction and dependence. There were more than 63,600 drug poisoning (overdose) deaths in America in 2016. The UK is now seeing similar use of opioids to that seen in America with significant increases in the use of opioid medication and increasing deaths caused by drug poisoning.

What are the problems with long term opioid use?

- Sedation – feeling sleepy, especially during the day
- Changes to hormone levels which may cause:
 - Loss of sexual drive
 - Erectile dysfunction/impotence
 - Menstrual irregularities
 - Infertility
 - Fatigue
 - Depression
 - Anxiety
 - Loss of muscle strength
 - Osteoporosis (thinning of the bones)
 - Compression fractures of bones
 - Milky discharge from nipples (in men and women)

- Increases in pain (Opioid-induced hyperalgesia)
- Constipation and bowel upset (nausea, vomiting, cramps)
- Difficulties in treating other pain (such as injury or surgery)
- Problems with breathing – particularly with higher doses or along with asthma or COPD (bronchitis, emphysema, smoker’s cough etc).
- Becoming addicted to opioids
- Tolerance (needing increasing doses to give the same effect)

How do I stop these medications?

You must consult with your GP about this. **Do not stop any opioid medications suddenly.**

In general we recommend a slow and gradual reduction in your dose. We would reduce the short acting or ‘breakthrough pain’ medication first and then reduce the long acting one. We would aim to reduce your dose by approximately 10% every two weeks. To do this more comfortably your opioid medication may need to change, for example, if you are using fentanyl patches we would need to move you to an oral medication and then reduce the dose.

If you are taking certain other medications, such as diazepam, this will also need to be gradually reduced and stopped. This would normally be before you reduce the opioid.

If you suffer from nerve pain (neuropathic) there are other medications which are more helpful for this type of pain and these may be trialled in place of your opioid medication.

What might I notice when reducing opioids?

We will work to reduce any discomfort but some people may notice some symptoms of withdrawal, especially when the dose has just been reduced. This may be similar to a short-lived and mild flu-like illness and can include:

- Sweating
- Nausea or feelings of sickness
- Stomach upset, cramps or diarrhoea
- Agitation/irritation/anxiety
- A temporary increase in pain levels

These will come and go, reduce in severity over time and will stop completely once the opioids drugs have been discontinued.

What will my pain be like when I am off these medications?

Most patients find that once they have worked with their doctor and pharmacist to reduce and stop opioids their pain is not very different, sometimes it even reduces.

Overall patients report a far better quality of life and increased ability to function once they are able to discontinue these medications. Benefits of this include ability to interact more with friends and family and take part in social activities and hobbies again.

Some statements from patients:

While taking opioids

"Being in zombie mode made me feel very down."

"I was always putting things off until later but later never came and I'd go for a lie down instead."

Once opioids are stopped

"My kids say it's amazing to have dad back."

"I feel like I've got my life back."

"I'm a totally different person from this time last year."

Resources

Addaction

www.addaction.org.uk

One of the UK's leading mental health, drug and alcohol charities. There are branches in Ayr and Kilmarnock.

- Addaction South Ayrshire 1st Floor 3 Killoch Place, Ayr 01292 430529
- East Ayrshire Recovery Service 1, the Cross, Kilmarnock 01563 558777

P.A.I.N - Pain addiction information network

www.painkillerfree.co.uk

A charity with the aim of advancing awareness of addiction to opioid painkiller medications in the UK.

Pain Killer Addict

www.painkiller-addict.com

A website by the journalist Cathryn Kemp with some information about her battle with fentanyl addiction

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