

# Pain Management & Opioid Safety



Bassett Healthcare Network

The goal of pain management is to help you manage your pain as safely and effectively as possible so that you can get back to doing the things that are most important to you. It may not be possible for you to be pain-free, but we will work as hard as we can to help you feel better.

## Pain Management Strategies: Non-opioid

There are many non-medicine treatments that work well for pain, including:

- Acupuncture\*
- Chiropractic care (talk to your prescriber first)
- Community-based self-management programs, such as Living Well\*
- Counseling, cognitive behavioral therapies\*
- Heat or ice\*
- Massage
- Meditation and mindfulness
- Physical therapy and exercise\*
- TENS unit (transcutaneous electrical nerve stimulation)\*

\*available within the Bassett Healthcare Network

There are many non-opioid medicines that work well for pain and have fewer risks and side effects than opioids, including:

- Acetaminophen (Tylenol)
- Non-steroidal Anti-inflammatories (NSAIDs) - ibuprofen (Advil, Motrin), naproxen (Aleve), etc.
- Medicines sometimes used for depression or seizures that have also been found to work well for pain management include: duloxetine (Cymbalta), venlafaxine (Effexor), nortriptyline (Pamelor), gabapentin (Neurontin), or pregabalin (Lyrica)
- Lidocaine patches (Lidoderm)

## Pain Management Strategies: Opioids

Opioids (e.g. oxycodone, hydrocodone, morphine, fentanyl, methadone, oxymorphone, hydromorphone, tramadol) can help patients deal with severe pain for a short period of time. These may be used with other approaches listed above. Opioids can have bad side effects, including addiction, tolerance, dependence, misuse, accidental overdose, or death. You may be more likely to have side effects if you have sleep apnea, asthma, COPD, are elderly, or are overweight. Side effects may be worse if you drink alcohol or take medicines that make you feel sleepy. Your treatment team will work with you to manage any side effects that may occur, such as:

### Side Effects

- Common side effects
  - Not thinking clearly, or feeling sleepy, drowsy or dizzy - you should not drive or use machinery while taking opioids
  - Difficulty having a bowel movement (a stool softener or laxative is usually needed, ask your prescriber)
  - Nausea and vomiting
  - Dry mouth
  - Itching
  - Trouble peeing
- Serious side effects
  - Trouble breathing
  - Allergy (rash, severe itching or hives, and/or swelling of the throat, lips or face)
  - Dependence, tolerance, or addiction
- Long-term use side effects (using opioids for more than 3 months), in addition to common and serious side effects:
  - Pain that actually gets worse despite taking the medicine, called hyperalgesia
  - Sexual and hormone-related effects
  - Depression and anxiety
  - Sleepiness

## Overdose

Opioid overdose can kill you. Signs of an overdose can be slow or stopped breathing or heartbeat; trouble waking up; pale, cold or clammy face; blue fingernails or lips. You are at an increased risk for opioid overdose if you:

- Have sleep apnea, asthma, COPD or other medical conditions that can affect breathing
- Are overweight
- Take a long-acting opioid (e.g. MS Contin, Oxycontin, fentanyl patch, methadone)
- Mix opioids with sleeping pills, sedatives, benzodiazepines, alcohol, or other illegal drugs
- Use an opioid in any way other than as advised by your prescriber

Naloxone (Narcan) reverses opioid overdose. Talk with your prescriber about getting a Naloxone prescription.

## Addiction and other risks

- Dependence (the way your body works changes when you have taken certain medicines for a long time, and you constantly need the medicine to prevent withdrawal symptoms) - if you develop dependence, you may go through withdrawal if you do not have the medicine
- Tolerance (needing more of the medicine to get the same effect on your pain)
- Addiction (thinking about the medicine all the time and making bad choices in order to get more of the medicine)
- If any of the above happens, you may need to slowly wean off the medicine; ask your prescriber for help
- You are at increased risk of opioid addiction if you:
  - Have a history of drug or alcohol misuse, addiction, or overdose
  - Have mental health conditions (such as depression, anxiety, PTSD, bipolar, OCD, schizophrenia, ADHD, etc.)
  - Have a history of sexual abuse
  - Are between the ages of 16 and 45 (taking opioids before the age of 18 increases future opioid misuse risk by 33%)

## For Help

If you have any concerns about your opioid use, please reach out to your opioid prescriber and contact your county's Chemical Dependency Service: **New York State HOPEline 1-877-8-HOPENY**. Available 24 hours a day, 365 days a year for alcoholism, drug abuse and problem gambling. All calls are toll-free, anonymous and confidential.

## Storage/disposal

- Keep opioids **out of the reach of children or pets**
- Do not share opioids with others
- Keep opioids protected by keeping them in **a locked container or safe**
- If you are admitted to the hospital, leave your opioid medicines at home as they will be provided for you
- **Safely dispose of unused medicines - Safe disposal is available at Bassett, FoxCare and O'Connor outpatient pharmacies, as well as many local police offices**

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I have read these instructions and have had them explained to me in full by a member of my health care team.  
My signature indicates my understanding.

Patient signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness (staff) signature: \_\_\_\_\_ Date: \_\_\_\_\_