Patient Information Guide: Long-term Opioid Therapy for Chronic Pain

Department of Veterans Affairs and Department of Defense (DoD) employees who use this information are responsible for considering all applicable regulations and policies throughout the course of care.

Introduction

Your health care provider may have prescribed opioid medication to help you manage your chronic pain. This patient guide gives you important information about the effects of opioids (also called “opiates” or “narcotics”) and outlines what your health care provider expects of you and what you can expect from your provider. This information is important because opioids can be dangerous if not taken responsibly.

It is important to understand that opioid medication doesn’t work for every person or type of pain. While opioids may reduce your pain, they are unlikely to take it away completely. You will work with your health care provider to develop a pain care plan to identify your goals for treatment. You may be asked to sign an informed consent at the beginning of treatment and if changes are made to your pain care plan.

Your health care provider may taper or discontinue your opioid therapy if you do not benefit, or if the harms outweigh the benefits. You can still continue to receive treatment for your pain through other pain therapies that will be discussed with you.

These guidelines are not intended to represent TRICARE policy. Further, inclusion of recommendations for specific testing and/or therapeutic interventions within these guidelines does not guarantee coverage of civilian sector care. Additional information on current TRICARE benefits may be found at www.tricare.mil or by contacting your regional TRICARE Managed Care Support Contractor.

What are Opioids?

Opioids are a type of strong pain relieving medication used to treat moderate to severe pain that may not respond well to other pain medications. Patients taking opioids need to understand that their pain may not respond to opioids, that initial relief may not be maintained, and that the risks of opioids need to be carefully balanced against the benefits.

Opioids can have serious side effects if not taken properly.

Prescription opioid medications include

- Codeine
- Fentanyl (e.g., Actiq®, Duragesic®, Fentora®)
- Hydrocodone (e.g., Vicodin®)
- Oxycodone (e.g., OxyContin®)
- Oxycodone and acetaminophen (e.g., Percocet®, Endocet®, Roxicet®)
- Oxycodone and naloxone (e.g., Targiniq ER®)
- Oxymorphone (e.g., Opana®)
- Meperidine (e.g., Demerol®)
- Methadone (e.g., Dolophine®, Methadose®)
- Morphine (e.g., Kadian®, Avinza®, Astramorph®, MS Contin®, Oramorph®)
- Tramadol (e.g., Tramal®)
- Buprenorphine (e.g., Norspan®, Temgesic®)

Working Together with Your Provider and Your Pain Care Plan

The purpose of a pain care plan is to:

- ☑ Maximize your health and quality of life
- ☑ Increase your level of function and activity
- ☑ Decrease the effect of pain on your life
- ☑ Minimize the risk of side effects from medications
- ☑ Ensure the safe use of opioid medication

The effectiveness of your pain care plan depends, in part, on the strength of your relationship with your health care provider. Pain treatment is not just about the provider intervention alone, but about the provider and patient (and family) working together. There needs to be trust, honesty and good communication between you and your health care provider.

Your provider will discuss your pain care plan with you to identify reachable goals and to make sure that you are clear about the pain relief and daily function that you can expect to achieve when opioids are a part of your treatment. You may be asked to sign an informed consent at the beginning of treatment and if changes are made to your pain care plan. Informed consent increases the likelihood that your treatment will go smoothly.

Some of the things that may be expected of you are:

- Be honest with the health care team and treat them with respect – the team will be honest with you and treat you with respect as well
- Agree to get all of your prescriptions from one health care provider only
- Be honest and thorough when you report your health, drug and alcohol history
- Speak up! If you have questions and/or concerns, let your provider know
- Before taking any medications, talk with your health care provider about all of the health care services you are receiving

- Tell all of your health care providers the names of the medical centers/clinics where you receive opioids
- Emergency rooms and same day care are not the best places to get treatment for your chronic pain – if you have to go to an emergency room, tell the health care provider about your pain care plan and all medications that you are currently taking
- In case of an emergency, keep a list of all medications you are currently taking
- It is important to follow your pain care plan because your plan may include lab tests and other ways to manage your pain
- You will need to meet with your provider one to four weeks after starting opioid therapy and up to once every three months or more frequently if needed
- Give your provider a phone number and address where he/she can reach you and update your contact information at every visit

As part of your treatment and to ensure your safety, your provider or other health care team members may order urine or blood drug screens on a regular basis. Drug screens are conducted to ensure that you are taking your opioid medication as prescribed and to ensure compliance with your pain care plan. Lab results will also let your provider know if you are taking other medications that might interfere or cause problems with your opioid treatment or if your urine or blood contains drugs not prescribed for you, such as "street" or illegal drugs and alcohol.

The Department of Veterans Affairs (VA) and the Department of Defense (DoD) medical systems do not use drug screen lab results for law enforcement or employment purposes when related to your patient care. However, service members need to be aware that providers are obligated to inform commanders about any issues that impact the service member's fitness for duty and to ensure the safety of the public.

Alternatives to Opioid Therapy

It is important to remember that taking an opioid medication to reduce your pain is only one part of managing your pain. Opioids alone are not enough to treat your pain and to improve your quality of life. Your provider will likely offer additional ways to manage pain such as:

- Heat and cold therapy
- Stretching
- Exercise
- Massage
- Chiropractic
- Relaxation or stress reduction training
- Physical therapy
- Occupational therapy
- Cognitive behavioral therapy
- Attention to proper sleep
- Counseling
- Pain care specialist
- Surgery
- Pain school or classes
- Spiritual
- Weight loss
- Nerve stimulation
- Injections
- Acupuncture
- Meditation
- Social support
- Non-opioid pain medications (e.g., non-steroidal anti-inflammatory drugs, antidepressants, anticonvulsants)

Taking Opioids Responsibly

When taken as prescribed, patients can often use opioid medication to manage pain safely and effectively. Because opioid medications can be dangerous, it is important that you:

Take your opioid and non-opioid pain medications only as prescribed. Make sure you take the right dose of medication at the right time. Don't avoid taking your pain medication to save it for a later time and don't take someone else's prescriptions.

Never take more opioid medication than prescribed. If you take extra doses without the direction of your health care provider, you could become very sick or even die from an opioid overdose. You may also run out of your opioids before you can refill your medication – this may lead to withdrawal symptoms. If you have severe, increased or new pain, don't just take more of your opioids. Call your pain treatment provider or clinic to decide on the best care.

Make an effort to remain in the care of one primary health care provider. This will help ensure the right amount and type of medication is prescribed, so you have optimal pain management and continued care.

Inform your primary health care provider about any other health care that you are receiving from additional providers (e.g., behavioral health, interdisciplinary team, providers outside VA/DoD).

Tell your health care provider about all medications and supplements that you currently take. Coordination of pain management services is important to ensure your safety. You should know that your health care provider may choose to alter your pain management care plan, including long-term use of opioid therapy, to take into account all care that raises safety concerns.

Inform ALL of your providers that you are currently prescribed opioids.

Tell your primary health care provider if another provider prescribes an opioid for you. Tell your primary health care provider within 24 hours or on the next weekday if another provider prescribes an opioid (e.g., for acute pain after surgery).

Prevent opioid misuse, abuse and diversion. Never sell or share your prescription opioids or take another person's opioids – doing so can lead to criminal charges.

Please advise your provider if you are taking medications for depression or anxiety, for example:

- Benzodiazepines
- Prozac®
- Paxil®
- Cymbalta®
- Effexor®
- Tofranil®
- Tofranil-PM® (Imipramine)
- Xanax®
- Klonopin®
- Ativan®
- Muscle Relaxers (Soma® or Flexeril®)
- Hypnotics (Ambien® or Lunesta®)

Keep your medications in a safe and secure place. The VA and DoD may not replace doses that are lost, stolen or shared with others.

Get help and support from your friends and family. Your health care provider may encourage you to involve your friends and family to learn about opioids. He/she may also ask for permission to contact your family about your opioid pain care. Social support is an important component of pain management.

Don't drink alcohol or take illegal drugs. It is not safe to drink alcohol or use illegal drugs when you are taking opioids. They can impair your ability to manage your opioid therapy and cause severe harm or death. If you abuse alcohol or use illegal drugs, your provider will encourage you to get treatment for this problem and may stop prescribing opioids. Treatment for alcohol or drug abuse will not interfere with your ability to get treatment for your pain or other conditions and may be helpful.

Illegal drugs include

- Marijuana not medically prescribed [NOTE: It is illegal for patients to possess marijuana on federal property to include all VA and DoD facilities]
- Ketamine (Special K, Vitamin K, Cat Valium)
- PCP
- Cocaine /Crack
- Heroin
- Ecstasy or MDMA (Molly)
- Methamphetamine
- Bath Salts
- LSD
- Diverted ("black market") prescription drugs (e.g., opioids, benzodiazepines, other controlled substances, steroids)
- Inhalants (e.g., glue, solvents, lighter fluid)

Opioid withdrawal

Never change or stop taking any opioid medication without checking with your health care provider first.

If you stop taking opioids suddenly, you may have withdrawal symptoms. If your provider asks you to slowly decrease your use of opioids, follow the provider's instructions. A slow decrease often helps to reduce withdrawal symptoms and to prevent you from feeling sick. If you think you are having withdrawal symptoms, tell your provider. Your provider may be able to give you medication for a short time to help control them.

Withdrawal symptoms can include:

- Stomach cramps
- Trouble sleeping
- Extra saliva
- Tears in your eyes
- Loss of appetite
- Anxiety
- Muscle aches/cramps
- Sweats
- Increased heart rate
- Nausea
- Increased blood pressure
- Runny nose
- Feeling very tired
- "Goose bumps"

Managing Side Effects and Risks

It is important that you are aware of the risks of taking opioids. It is also important that you report any side effects that interfere with your daily activities to your provider. This information will help you and your provider to develop a pain care plan that balances harms (side effects and risks) and benefits (pain relief and how well you function).

Possible side effects include:

1. **Sleepiness and sluggishness, especially if taken with drugs or alcohol can cloud your judgment and slow your reaction time.** Because of this, you are at risk for falls and accidents while driving, using tools or heavy equipment. Driving while on opioids may be considered driving under the influence (DUI) in some states.
2. **Mental confusion, bad dreams, hallucinations, agitation, depression or seizures.** Your provider will need to evaluate the underlying cause(s) if you experience these side effects and may need to change your dose or type of medication.
3. **Slowed breathing that can cause death.** This is more likely if you have sleep apnea or chronic lung disease and/or if you are on higher opioid doses. Slowed breathing or death is more likely if you take more medication than you're supposed to or mix opioids with other prescription medications (such as sleep aids, muscle relaxers and tranquilizers) or street drugs.

   If you have sleep apnea, your health care provider may:

   - Advise you to use only non-opioid pain therapy
   - Prescribe a breathing machine to use when you go to sleep
   - Advise you to avoid alcohol and medications that may make sleep apnea worse
4. **Allergies.** Allergic reactions to opioids are rare but do happen. If you get a rash or hives, call your provider or 911 right away. If you become short of breath, have throat swelling or feel like you may pass out, tell someone to call 911 right away.
5. **Low levels of testosterone can result in decreased sex drive.** For men, opioids may decrease the ability to have an erection. People with decreased sex hormones may experience depression, anxiety, tiredness, hot flashes and night sweats. Low testosterone can also cause loss of muscle mass, weakness, brittle bones (osteoporosis) and bone fractures.
6. **Drug interactions.** A drug interaction may occur when two or more medications are taken together. Tell your provider about all of the different medications you take, including prescription and over-the-counter drugs, as well as herbs or vitamins.
7. **Constipation, itching, sweating, feeling sick, vomiting or poor appetite.**

8. **Increased sensitivity to pain** also known as hyperalgesia.
9. **Women may have irregular or no menstrual periods and should take precautions to prevent pregnancy while on opioids**. Use effective birth control methods to prevent pregnancy during opioid treatment. Tell your provider if you are pregnant or plan to become pregnant because of the effects of opioids on unborn children. Babies born to mothers taking opioids may develop dependence, which can result in symptoms after birth. Women should consult with their health care provider to determine which medications they can continue taking during pregnancy. Stopping opioids suddenly if you are pregnant and physically dependent on opioids can lead to complications during pregnancy.

Other risks include:

1. **Physical dependence, tolerance or addiction to opioids.** Physical dependence means you will experience withdrawal if you stop taking opioids suddenly. Tolerance means you need to take more of the medication to get the same effect. Addiction means you are not able to control your use of opioids even if you wanted to, which might result in harmful outcomes.[1]
2. **Increased risk of death.** Opioids are one of the primary prescription drugs associated with death in the United States.[2] Death is more likely when you take larger doses of opioids because opioids may cause respiratory depression.
3. **Immune system changes.** Your body's immune system helps fight infections. Opioids may weaken the immune system. Long-term opioid use may result in infections or immune-related illnesses.

Filling Opioid Prescriptions and Safe Storage

- Fill all of your opioid and other prescriptions at the same pharmacy and fill your prescription in person if your health care provider asks you to do so
- Ask your health care provider how to refill or renew your opioid prescriptions
- Check with your provider to ensure you know when (i.e. days and times) your prescription can be refilled
- If you pick up your prescriptions at the pharmacy, contact your health care provider at least three business days before your next opioid prescription is due
- Check with your provider to see if you are eligible to receive refills through:

- My HealtheVet (myhealth.va.gov) once you have been verified to use the prescription refill section of MyHealtheVet
- TRICARE Pharmacy Program (express-scripts.com/TRICARE/)

When ordering by mail:

- Contact your health care provider or pharmacy at least 10 business days before your refill is due
- Receive all your mailed prescriptions at a safe address – if you don't have a safe address to receive your opioids by mail, pick them up at the pharmacy
- Make sure that no one else can sign for or pick up your prescription

Storage of your opioid prescriptions:

- Keep your opioids in a safe, locked place, out of reach of children, family, visitors and pets
- Do not leave medications in the bathroom or near the sink
- If you are concerned about the safety of storing medications in your home, ask your pharmacist about the proper way to store your medications
- Store medications out of direct sunlight in a cool dry place
- Always store your opioids in the original labeled container; this will also help answer any questions about your medications if you travel
- Never combine different medications into one bottle

STOP

If someone steals your opioid medication or prescription, report the theft to the police. If you will need a refill or new prescription sooner than usual, give your provider and pharmacy a copy of the police report, so they will know why there is a need sooner than expected. It is helpful to make sure no one else can sign for your prescription or take it when delivered by mail.

Dispose of expired, unused, unneeded prescription drugs safely and securely:

- Both the DoD and VA have implemented programs to allow for the return and appropriate disposal of extra or unwanted medications

- Take advantage of the VA's drug mail-back program or the drug take-back program in your community
- Do not flush unwanted or unneeded drugs down toilets or drains or throw them in the trash – this can harm the water supply and wildlife

Prescription Drug Monitoring Programs

The Prescription Drug Monitoring Program (PDMP) is designed to identify potential unsafe behavior regarding controlled medications and prevent or decrease the risk of over utilization. Most states have programs that track prescription drugs to identify and address inappropriate or unsafe patterns of controlled drug use.

For your safety, your provider and pharmacist will monitor when you renew and refill your opioids, both within the VA and DoD and, when allowed or required by law, outside the VA or DoD.

References

1 U.S. Department of Health and Human Services Centers for Disease Control and Prevention. (2016). Prescription Opioids: What You Need to Know Fact Sheet. Retrieved from www.cdc.gov/drugoverdose/pdf/aha-patient-opioid-factsheet-a.pdf

2 Opioid Therapy for Chronic Pain Working Group, Department of Veterans Affairs & Department of Defense. (2017). VA/DoD Clinical Practice Guideline for Opioid Therapy for Chronic Pain. Version 3.0. Retrieved from https://www.healthquality.va.gov/guidelines/Pain/cot/VADoDOTCPG022717.pdf

Updated June 2017 by Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury

PUID 4314