# The Changing Landscape of Opioid Use and Abuse

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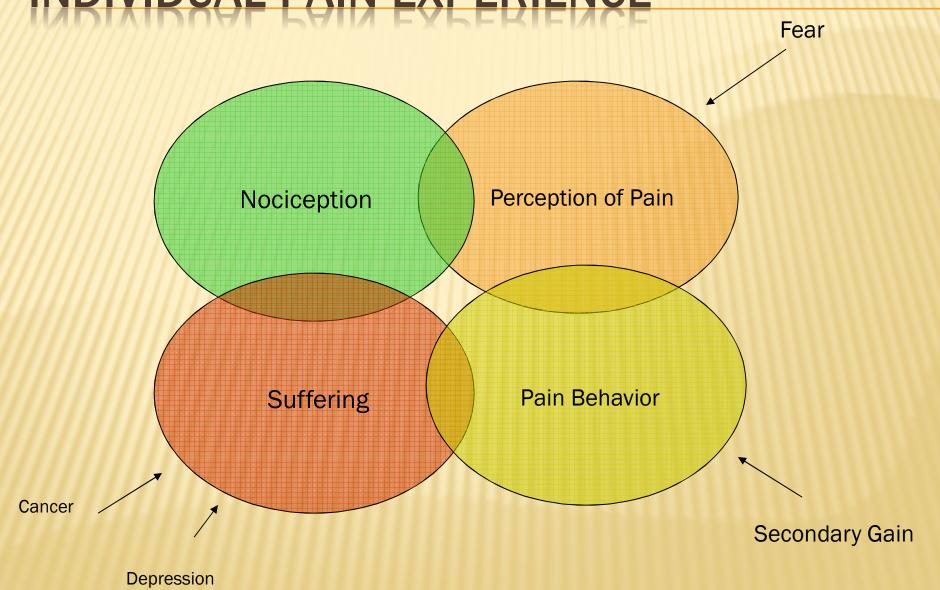
# WHAT IS CHRONIC PAIN?

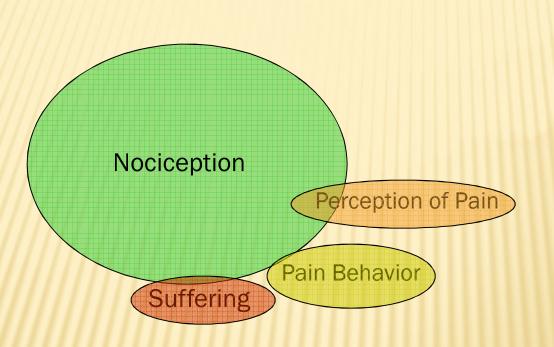
**\* ACUTE PAIN** 

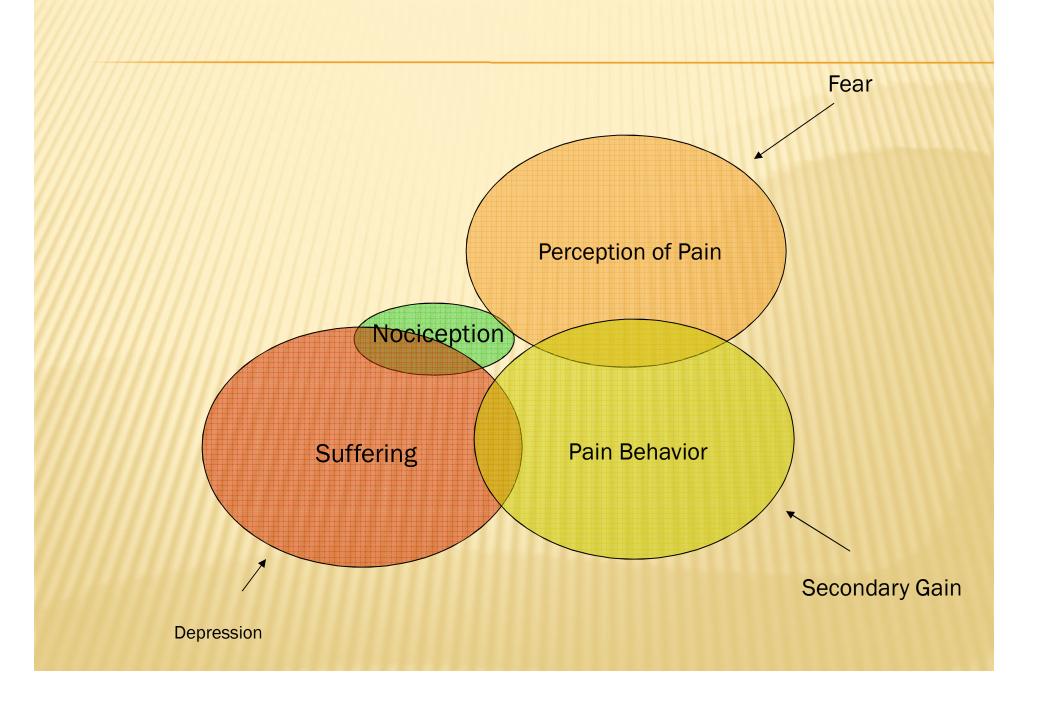
#### **CHRONIC PAIN**

Pain lasting longer then 3 months or past the time of normal tissue healing

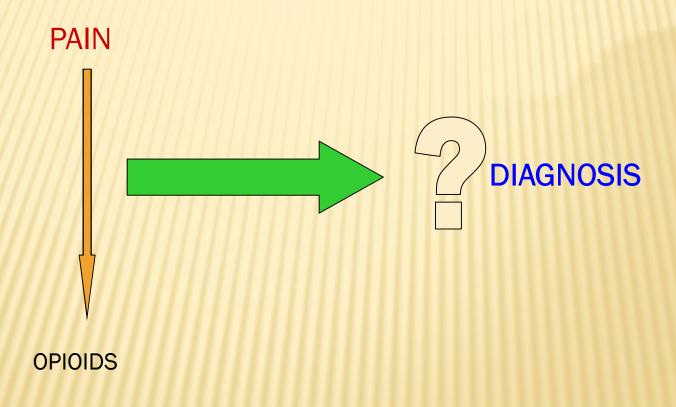
# INDIVIDUAL PAIN EXPERIENCE







# OPIOID MANAGEMENT



# **HOW DID WE GET HERE??**

\* HERION EPIDEMIC

\* NARCOTIC CRISIS

United States consumes 80% of world opioids

× 91 Americans die everyday from opioid overdose

#### NEW ENGLAND JOURNAL OF MEDICINE

× 1980- published letter to the editor

\* "Addiction Rare in Patients Treated with Narcotics"

\* 11,000 + patients treated with narcotics with only four cases of addiction \* 608 additional citations/ publications use that letter for evidence to use narcotics

\* 72% point specifically to that letter as proof that addiction was rare among long-term narcotic users

# **1980 LETTER**

Opioids rarely used in outpatient setting in the 80's

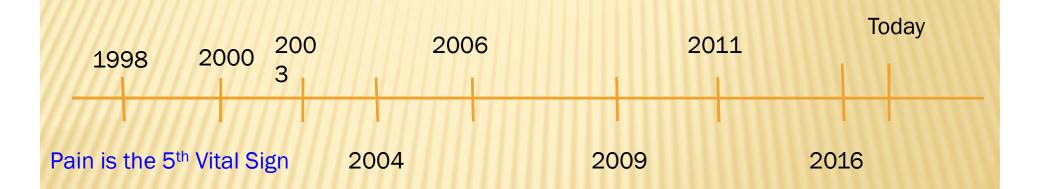
\* The letter actually refers to patients that were monitored in the hospital and made no reference to the general population or an outpatient setting for prescribing narcotics.

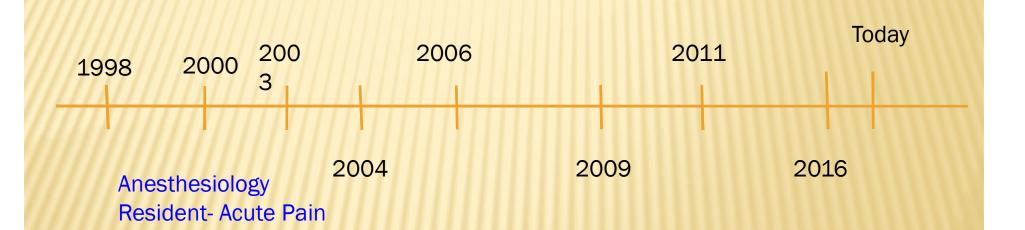
# PHARMACEUTICAL COMPANIES

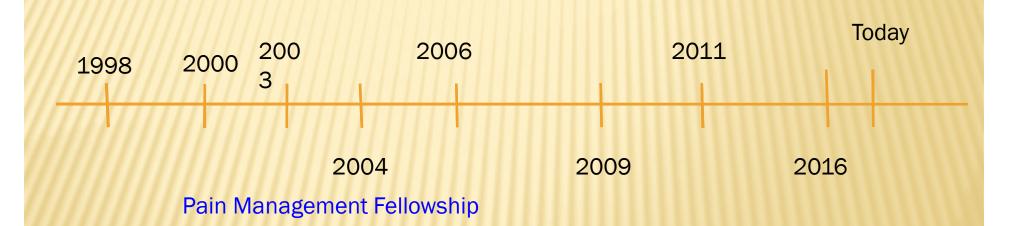
- Purdue pharma- Oxycontin
- **×** Teva Pharmaceuticals
- Allergan
- Endo Health Solutions and Janssen

\* \*Ohio Attorney General filed suit against manufacturers that led prescribers to believe that opioids were not addictive

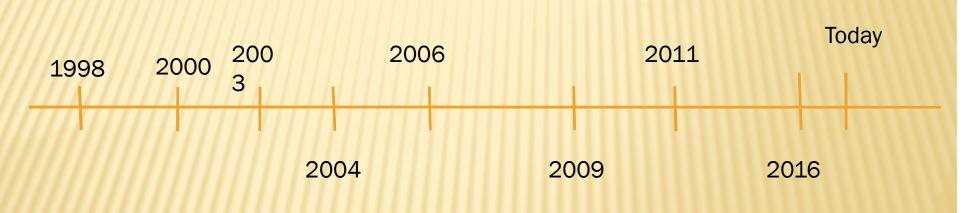




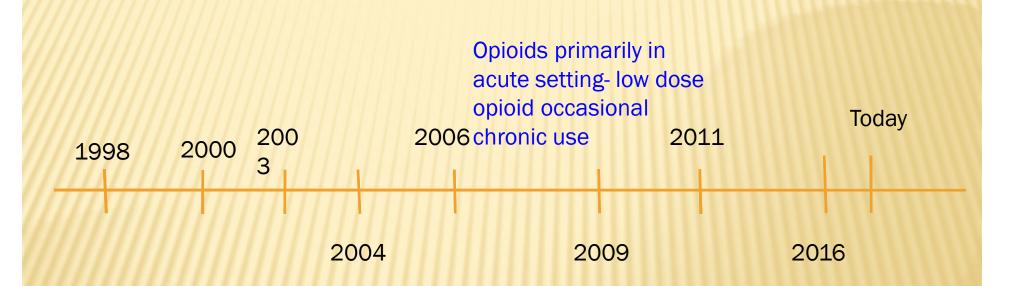




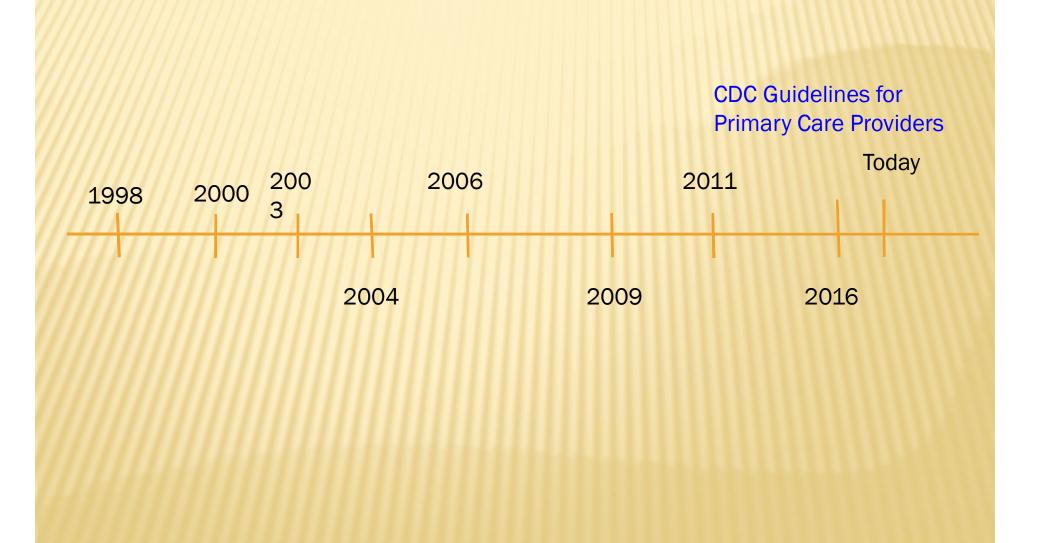


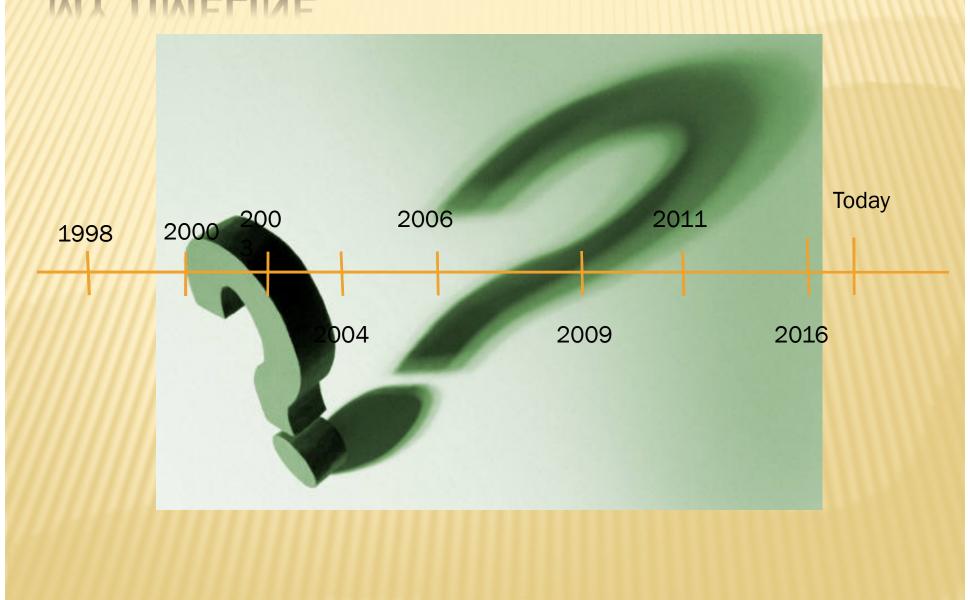


**Private Practice** 









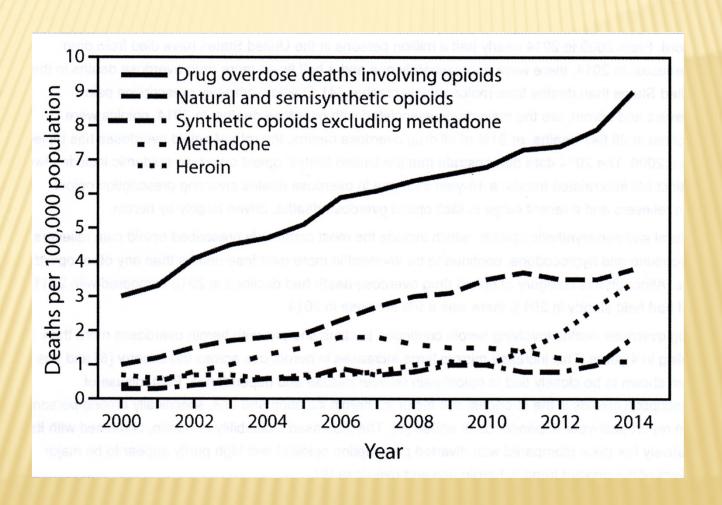
Research Gaps on Use of Opioids for Chronic Noncancer Pain: Findings From a Review of the Evidence for an American Pain Society and American Academy of Pain Medicine Clinical Practice Guideline

**x** J.jpain.2008.10.007

# CDC GUIDELINE FOR PRESCRIBING OPIOIDS FOR CHRONIC PAIN- US, 2016

259 million prescriptions for opioid pain medication was written in 2012

One in 32 patients who escalated to opioid dosages > 200 morphine milligram equivalents died from opioid-related overdose.



# **PEDIATRICS**

\* Prescribing opioid pain medication before high school graduation is associated with a 33% in the risk of later opioid misuse.

#### EFFECTIVENESS OF OPIOIDS

No study of opioid therapy vs placebo, no opioid therapy, or nonopioid therapy for chronic pain evaluation long-term (>1 year) with outcomes related to pain, function, or quality of life.

Most placebo controlled trials were < 6 weeks in duration</p>

#### RISK ASSEMSSMENT AND MITIGATION

- NO study evaluating the effectiveness of risk mitigation
  - + Patient education
  - + Pain contracts
  - + Urine drug screen
  - + Counting pills

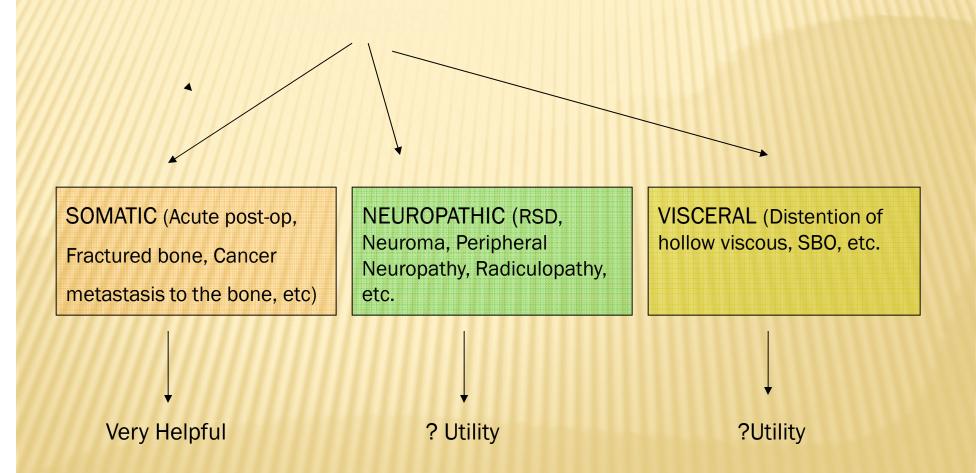
#### GOOD EVIDENCE FOR NONOPIOID TREATMENT

- Non opioid medications (tylenol, NSAIDS, neurontin, TCA)
- Physical conditioning
- Cognitive behavior therapy
- Multidisciplinary therapies

# INITIATING OPIOID TREATMENT

\* If a patient with chronic pain does not have a meaningful response to narcotic treatment within 1 month are unlikely to experience pain relief with longer-term use.

# ACUTE OPIOID MANAGEMENT



# **OPIOID MANAGEMENT**

- AGE? Is tolerance going to be an issue
- Pathology? Chronic benign pain with low pathology
- Chemical Dependency ? Denial Urine Screen
- Functional ability? Coach Potatoes
- Long Term Goals? Briefly use opioids to facilitate rehabilitation and then taper off
- Personality Disorders/Psychiatric issues/Psychosocial issues ?

#### **OPIOID MANAGEMENT**

- Difficult medications to manage Utility
- Physical Dependence
- Hyperalgesia state with withdrawal
- Potential for a paradoxical effect with chronic use