



# Opioid Therapy for Chronic Pain: What to Expect

Your doctor recommends opioid therapy for you. Please read the information in this tip sheet carefully. Ask your doctor about any parts you don't understand.

## What are opioids?

Opioids are strong medicines that can help manage your chronic pain. They work best when you use them together with self-care and other treatments. The goal of opioid therapy is to lessen pain while helping you do everyday activities.

## What are the benefits?

Opioids are an effective way to manage chronic pain. However, they are powerful medicines and can be very dangerous if not taken the way your doctor tells you to. If you cut back on or stop these medicines abruptly (cold turkey) you may develop withdrawal symptoms.

## What are the risks?

Opioids can cause addiction. The risk is higher in people who have a history of addiction to other substances or a family history of addiction. Talk to your doctor if you have a personal or family history of substance abuse.

## What if I don't want to take opioids?

If opioids are not for you, consult with your doctor or chronic care team for other options and treatments to help manage chronic pain.

## Have more questions?

If you would like more information on opioids, you can call or email your doctor or chronic care team. Also visit the Drug Encyclopedia at [kp.org/medications](http://kp.org/medications) to learn more about the medicine your doctor prescribed for you.

## What are the side effects?

Most common side effects can be controlled. Many people taking opioids do not have serious side effects.

### Common side effects

- Constipation
- Light-headedness
- Loss of appetite
- Upset stomach
- Sweating
- Feeling dizzy
- Feeling drowsy (drowsiness)
- Pain feels worse

### Less common side effects

- Urinary retention (unable to pee)
- Feeling sad or depressed
- Feeling more excited or joyful
- Feeling "slowed down"
- Slow, shallow breathing
- Sexual problems
- Itchy skin
- Feeling confused
- Slow heart beat

## What kind of opioids will my doctor prescribe?

There are two options: short-acting and long-acting opioids. You and your doctor will decide which will work best for you.

### How do short-acting opioids work?

They work more quickly to relieve pain, but the pain relief lasts for a shorter period of time, typically 4-6 hours. You generally take them "as needed."

#### Examples include:

- Codeine/acetaminophen (Tylenol with codeine)
- Hydrocodone/acetaminophen (Vicodin, Lortab, Norco)
- Hydromorphone/hydrochloride (Dilaudid)
- Morphine-immediate release (MS IR or Roxanol)
- Oxycodone-immediate release (Oxy IR; Roxicodone)
- Oxycodone/acetaminophen (Percocet)
- Oxycodone/aspirin (Percodan)

### How do long-acting opioids work?

They help lessen pain for a longer time period and provide a more even level of pain control. You take them less often but at regular intervals (typically every 12 hours) rather than as needed. You should always follow the dose and dosing interval prescribed by your doctor.

#### Examples include:

- Fentanyl-transdermal patch (Duragesic)
- Methadone (Dolophine)
- Morphine-extended release (MS Contin; Oramorph SR)
- Oxycodone-extended release (Oxycontin)
- Oxymorphone extended-release (Opana ER)



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## Managing constipation

Opioids cause constipation by slowing down the nerves that stimulate the gastrointestinal tract.

Most people who take opioids will need to take over-the-counter medications to manage constipation. The most effective medicines are stimulant laxatives such as: senna (Senokot), ExLax, or bisacodyl (Dulcolax, Fleet, Alophen, Correctol).

Bulking agents that contain methylcellulose (Citrucel), polycarbophil (Fiber-Lax), or psyllium (Metamucil) are less effective for opioid-induced constipation and can actually make it worse. They should be avoided if constipation is from opioid use.

### Guidelines for taking laxatives and stool softeners

The goal is to have one soft bowel movement at least three times per week without cramps or straining.

	Step-by-Step Instructions
1	Begin by taking 1 tablet of senna 2 times a day.
2	If no bowel movement after 2 days, take 2 tablets of senna 2 times a day.
3	If no bowel movement after 3 days, continue taking 2 tablets of senna 2 times a day and add 30 ml of milk of magnesia. Insert 1 bisacodyl rectal suppository about 1 hour before bedtime.
4	If no bowel movement by morning, call your doctor.

### What safety measures should I take?

- When you start opioids or when your doctor increases the dose, it may cause drowsiness. Until you get used to the way the medication affects you, avoid driving, using heavy machinery, or doing any activity that requires you to be alert.
- If you drink alcohol, talk with your doctor before you start your opioid medicine. Mixing alcohol and opioids can lead to rapid release of the medicine. This can cause overdose or serious side effects including slowed breathing, coma, and death.
- Talk with your doctor before you use medicines such as tranquilizers or sleep aids.

- Carefully follow the directions for taking your medicine. Do not adjust the dose up or down yourself without talking to your doctor or care team.
- Keep medicines in a safe place where children or pets can't get to them.
- Use birth control to prevent pregnancy and talk with your doctor if you are thinking of becoming pregnant, or are currently pregnant or breastfeeding.

### In case of an overdose

If you think that you or someone else has taken an overdose, call your local poison control center or call 911. The amount that could cause symptoms of overdose may be different for each person. How often a person has taken opioids before, as well as how much he has taken now, might affect whether he has symptoms of overdose.

### Other resources

- You play a central role in managing your pain. Visit [kp.org/pain](http://kp.org/pain) for effective, self-care options, medications, and other treatments to help you feel better and remain in control of your life.
- For information about your specific medication, visit our Drug Encyclopedia at [kp.org/medications](http://kp.org/medications).
- Consult with a pharmacist if you have questions about your medicines.
- Visit your physician's home page at [kp.org/mydoctor](http://kp.org/mydoctor). In the left navigation bar, under "Healthy Living Resources," click on **podcasts**, **videos**, and **online programs** to learn skills to help manage your pain.
- Check your *Kaiser Permanente Healthwise Handbook*.
- If you are hit, hurt, or threatened by a partner or spouse, this can seriously affect your health. There is help. Call the National Domestic Violence Hotline at 1-800-799-7233 or connect to [ndvh.org](http://ndvh.org).

This information is not intended to diagnose or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor. If you have questions or need more information about your medication, please speak to your pharmacist. Kaiser Permanente does not endorse the medications or products mentioned. Any trade names listed are for easy identification only.