

Patient Information

Reducing your Opioid Pain Medications

Why does my opioid (morphine-based) pain medication need to be reduced?

A gradual reduction in your opioid (morphine-based) pain medication dose over the next *six months* is recommended to help improve your pain control, physical and psychological wellbeing and quality of life, and also to reduce side-effects.

- Opioid pain medications include morphine, oxycodone, fentanyl patch, methadone, hydromorphone and *codeine*. Lower-risk opioids are tramadol, tapentadol and Norspan patch.
- *Six months* is plenty of time to do a gradual opioid reduction (about 10% per week) without the likelihood of causing stress, withdrawal or worsening pain.
- In some cases, we may ask Next Step Drug and Alcohol Services to review your case. This is a routine safety measure for responsible prescribing and provides an expert opinion on your pain medication use. This doesn't necessarily mean we feel you're addicted or misusing your medications.
- The pain clinic cannot authorise your medications and your GP may not be able to prescribe them if we haven't made progress in reducing your pain medications in six months.

Why opioid pain medications are a concern

- The human body is not designed to have opioid medications floating around in the blood stream. When the body detects opioids in the blood it produces chemicals to counteract their effects, which *increases* the pain signal. This is call ***opioid-related pain (hyperalgesia)***.
- Your body may also get used-to (develop *tolerance* to) pain medications, meaning you continually need a larger dose to get the same pain relief. This leads to a vicious cycle—the higher the dose, the more side-effects develop and the worse the pain becomes.
- Patient with *opioid-related pain* often complain of *pain all over the body* with extreme sensitivity to touch and request increasing doses of pain medications. This makes the problem steadily worse, often resulting in huge doses!

The way to deal with this problem is a very gradual reduction in opioid pain medication to reset the chemical balance of your brain and reduce your pain.

- Your pain will very likely improve (or at least be no worse) on a lower dose, with fewer side-effects.
- The majority of pain specialists agree that for most people in chronic pain, a maximum of 60 mg of *morphine* equivalents per day is an acceptable trade-off between pain relief and side-effects.

Patient Information

What are some of the side-effects of opioids?

- Risk of overdose and death (by stopping a person breathing).
- Reduced testosterone and estrogen hormone levels.
 - Causes low energy, changes in mood (depression), menopause and reduced sex drive.
- Brittle bones (osteoporosis and poor teeth).
- Impaired brain function, leading to psychological problems, poor memory and sleep.
- Reduced immune system function, possibly higher risk of infections.
- Addiction (getting hooked) in up to 15% of pain patients.

Over-using pain medications

- The main reason people sometimes overuse their opioid medications is because it has a soothing and stress-relieving effect, rather than for pain relief—this is the same reason people over-use alcohol, tobacco, valium or marijuana and is called **chemical coping**.

Opioids are serious medications

- Opioids are just as dangerous as cancer-chemotherapy drugs.
- They are on the **poisons list** and need a special prescribing license.
- There is an opioid epidemic around the world with tens of thousands of people a year dying of medical opioid overdoses.
- Codeine over-the-counter pain medications were taken off pharmacy shelves in February 2018 because of these safety concerns.

Take home messages

- As you can see, there are many good reasons to reduce or cease your opioid medications, in order to improve your health and quality of life.
- In conjunction with your GP, we will review your doses regularly and prescribe the lowest dose that keeps you active, moving, working and comfortable, with the lowest possible side effects.