Opioids Are a Treatment Option

Opioids are strong analgesics that are prescription pain medications; they are among the oldest drugs known to humankind. These medications are made from or are chemically related to opium, a potent pain-relieving substance that comes from the poppy plant.

Opioids are just one of many treatment options available for people living with various types of chronic pain conditions and are often used in combination with other therapies. See APF's Treatment Options: A Guide for People Living with Pain for information on other types of pain management approaches.

Opioids are generally prescribed to treat short- or long-term moderate-to-severe pain (codeine and propoxyphene are used for mild-to-moderate pain). These medications are often used before, during or after surgical procedures or to help manage the pain related to childbirth, injury or trauma or other illnesses or persistent pain problems (for example, to help alleviate pain associated with cancer, osteoarthritis, diabetic neuropathy or low back pain).

In addition to reducing pain, opioids can help people get back to their daily lives and restore quality of life. Multiple clinical studies have shown that long-acting opioids, in particular, can help to improve:

- Daily function
- Psychological health
- Overall health-related quality of life for people with chronic pain

Opioids Can Be Used Safely

Problems with Opioids Can Be Prevented

Recognize and Take Action in an Opioid Emergency

Frequently Asked Questions about Opioid Safety

Types of Opioids

Opioids differ in:

- how well they control pain
- how much you have to take
- how long they last
- the ways they are given (for example, by mouth, through rectal suppository or intravenous injection, under the skin, or infused into a region around the spinal cord)

How Opioid Medications Work

The chemicals in opioids attach to specific proteins called opioid receptors, which are found in the spinal cord and brain (central nervous system), as well as the gastrointestinal tract. Opioids can change the way someone experiences pain. How? When these compounds bind to specific receptors, they block or reduce the electrical and chemical signals to the brain that create the sensation of pain; this reduces pain.

Opioids also affect the part of the brain associated with pleasure and sense of well being. In other words, these medications may affect the way we feel about pain and help us to better tolerate it.

Opioids are commonly grouped accordingly to how long they work to reduce pain (sometimes called the duration of action). For example:

Short-acting opioids provide pain relief usually for a period of four to six hours. These medications are useful in treating acute pain (for example, pain after surgery or injury) or flares of pain that occur with certain chronic pain conditions (for example, cancer, osteoarthritis or diabetic neuropathy). Short-acting opioids may be given alone or in combination with other pain relievers, most commonly acetaminophen. When an opioid is combined with acetaminophen, talk to your health care provider about whether you should limit other medications with acetaminophen (Tylenol). Higher doses could damage your liver.

Examples of opioids that are short-acting include:

- codeine
- hydrocodone + acetaminophen (Zydone or Vicodin)
- hydromorphone (Dilaudid)
- morphine (MSIR)

- oxycodone (Percocet or Tylox)

Rapid onset opioids provide fast-acting pain relief. These newer pain medications are delivered transmucosally, meaning the medication is absorbed in your mouth through your cheek. This class of pain medication is a good option for people with breakthrough pain because the medication gets into the body quickly to help relieve the pain as it rapidly rises and wears off. Most immediate-release pain medications peak in one hour; while the newer rapid onset fentanyl products peak in 30 minutes.

Depending on the nature of the pain, a health care provider may recommend that certain people taking long-acting opioids also take a "rescue" medication which could either be a short-acting or rapid-onset opioid. They may be prescribed on an as needed basis or before engaging in an activity that is known to trigger severe pain episodes.

Long-acting opioids are intended to provide a longer duration of pain relief. These formulations are sometimes called extended- or controlled-release. This means the medicine is gradually released into the body over an eight- to 24-hour period. Long-acting opioids are most often used for stable, chronic pain.

Examples of opioids that are long-acting include:

- fentanyl (Transdermal Fentanyl, Duragesic)
- hydromorphone (Exalgo)
- oxycodone (Oxycontin)
- morphine (MS Contin, Kadian, Avinza)
- methadone (Dolophin, Methadose)

For more information, see: FDA Medication Guides: http://www.fda.gov/Drugs/DrugSafety/ucm085729.htm.