

ABSTRACT*

Continuous Opioid Treatment for Chronic Noncancer Pain: A Time for Moderation in Prescribing

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Abstract: Physicians have embraced the concept of long-term opioid treatment for chronic noncancer pain (CNCP), as evidenced by increased prescribing. Many patients have benefited from more liberal opioid prescribing, but many have not, and prescription opioid abuse has risen significantly coincident with increased prescribing. Because of the potentially serious adverse effects of opioids, physicians must balance potential benefits against risks, especially in individuals at risk for opioid misuse, abuse, or dependence. This article reviews long-term, continuous opioid treatment of CNCP, current treatment guidelines, addiction risk stratification, opioid-induced hyperalgesia, and endocrine dysfunction.

Additional information regarding conclusions reached in this article:

- The medical evidence supporting daily use of opioids for chronic pain syndromes is weak.
- The expansion of opioid treatment from acute to chronic pain management represents an ongoing “experiment” with many unanswered questions. The National Institutes of Health is conducting studies to address the many deficiencies of prior studies.
- Risks of opioid use include drug abuse, addiction, decreased sex hormone levels, and increased pain (hyperalgesia).
- Physicians will need to adapt their clinical practices based on new information and treatment guideline

***Individuals interested in obtaining a reprint of the full article should contact Dr. Colameco**

