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Medicines to relieve chronic pain

When you need opioids (narcotics)—and when you don't

Opioids (narcotics) are common pain medicines. They can help if you have bad short-term pain—like pain after surgery for a broken bone. They can also help you manage pain if you have an illness like cancer.

But opioids are strong drugs. And usually they are not the best way to treat long-term pain, such as arthritis, low back pain, or frequent headaches. This kind of pain is called “chronic” pain. Before getting opioids for these problems, you should discuss other choices with your doctor. Here's why:

Opioids are prescribed too often.

Chronic pain is one of the most common reasons people see the doctor. One in five of these patients gets a prescription for opioids.

Common opioids include:

- Hydrocodone (Vicodin and generic).
- Oxycodone (OxyContin, Percocet, and generic).

Short-term use of these medicines may help. But there is no proof that they work well over time.

Opioids have serious side effects and risks.

Over time, the body gets used to opioids and they stop working as well. To get the same relief, you need to take more and more. Higher doses can cause serious side effects:



- Nausea
- Vomiting
- Itching
- Constipation
- Not being able to urinate enough
- Breathing problems, which can be deadly
- Confusion and mental disturbance

Opioids can be very addictive. Up to one in four people who take opioids long-term become addicted. Worst of all, every day, 46 Americans die from an overdose of opioid painkillers. And hundreds more go to the emergency room.

Opioids can be expensive.

Some opioids, such as oxycodone, can cost over \$1,000 each month. A good insurance plan may cover the drugs. But if you have bad side effects, you might still spend a lot.

Other pain treatments may work better and have fewer risks.

Pain medicine specialists say that usually you should try other treatments first:

- Over-the-counter medicines (see Advice column)
- Non-drug treatments:
 - Exercise
 - Physical therapy
 - Spinal manipulation
 - Massage therapy
 - Acupuncture
- Injections, such as steroids
- Other prescription drugs (ask about risks and side effects):
 - Non-steroidal anti-inflammatory drugs (NSAIDs)
 - Anti-seizure drugs

When should you consider taking opioids?

You have cancer with severe pain: Opioids may be the right choice if pain is a bigger concern than the possibility of addiction and the need to keep increasing the dose.

You have chronic pain that is not caused by cancer: Only use opioids when the pain is strongest. Your doctor should check you often.

If you need around-the-clock pain relief and other treatments are not helping enough: In this case, your doctor may consider an extended-release opioid like oxycodone, morphine, and the new drug Zohydro ER (a long-acting version of hydrocodone). Don't use long-acting drugs simply because it's easier to take fewer pills.

What should you do if your doctor prescribes opioids?

Talk to your doctor about the possible side effects and risks. Watch for side effects and signs of addiction. These include unusual moodiness or bursts of temper, cravings, and risk-taking.

Advice from Consumer Reports

Using over-the-counter pain relievers

Depending on your pain, an over-the-counter drug might be all you need. The drugs listed below are generally safe if they are used correctly and not too often:

- Acetaminophen (Tylenol and generic)
- Ibuprofen (Advil, Motrin IB, and generic)
- Naproxen (Aleve and generic)

The generic and store-brand versions of these drugs are cheaper than brand-name versions. And they are just as safe and effective.



Follow these safety tips:

- Read labels carefully and take the recommended dose.
- Do not take acetaminophen if you drink a lot of alcohol, or if you have liver disease or are at risk for it.
- Do not mix similar drugs, such as ibuprofen and naproxen. Both of these drugs are NSAIDs.
- Do not take ibuprofen or naproxen or any other NSAID for more than 10 days without talking to your doctor. These drugs can cause stomach and intestinal bleeding. Long-term use can cause kidney damage.

Watch out for acetaminophen overdoses.

Consumer Reports recommends staying below 3,250 mg per day.

- Taking more can increase the risk of liver, brain, and kidney damage.
- It is easy to get too much acetaminophen. It is in more than 600 products, including pain relievers, cold and sinus drugs, sea sickness pills, and sleep aids.
- Read labels and add up the totals if you take more than one drug containing acetaminophen.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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