

The pain killer dilemma: Prescribing opioids

Vicodin (hydrocodone/Tylenol) was the most prescribed medication in the United States from 2006-2011. Despite an enormous focus on the clinical use of opioid analgesics (pain medicines such as Vicodin) the topic is still quite controversial. As with any debate, there are two sides to the story. There are those within the medical community who would argue that given the rapid escalation in opioid overdoses over the last 10 years we should stop prescribing opioids altogether in chronic pain patients. The other side seeks to preserve the right of patients in chronic pain to live with less suffering.

In order to understand how we got where we are today, we must understand some of the history behind the use of opioids. Opioids have been used for thousands of years to control pain and other ailments. Throughout history, there has been a pendulum of controversy that swings to the extremes. Originally, it was delivered in the form of opium, until 1803 when morphine was developed. When the hypodermic needle was invented, morphine became widely used to treat soldiers with painful traumatic injuries.

In the 1890's, Heroin was developed by Bayer (yes, Bayer) and briefly promoted as a "less addictive" pain pill until found to be highly addictive and made illegal.



Dr. Jacob Blake

Concerns about addiction continued to lead to undertreatment of painful conditions such as cancer pain, end-of-life pain, and acute pain.

There was a movement in the 1960s sparked by the lack of pain control options in cancer patients to increase the accessibility of pain medications. In the 1990s the pharmaceutical industry churned out multiple synthetic medications with short- and long-acting profiles. Sales of opioids quadrupled between 1999 and 2010. Physicians began using these compounds more abundantly in the chronic pain population. Oxycontin became a household name. The rise in catastrophes associated with these medications followed suit. Prescription opioid deaths have become too common.

So do they work for chronic

pain and should they be available? Unfortunately, the answer is both yes and no. The data for long term opioid therapy relies mostly on short term studies (usually only 90 days). There is a dearth of long term data that shows higher functional status or less disability. Conversely, anecdotal experience tells us that there are many patients who use opioids appropriately and report significant improvements in these parameters. They seem to help ease pain and suffering in many patients who have already tried and failed more conservative treatments.

As a pain physician, you are charged with the difficult task of assessing the risk of every patient for potential diversion, abuse or addiction in the same breath that you offer up hope and compassion. Based on the risk level and condition, you must determine whether these medications are the right treatment for a patient in chronic pain. As a patient, you must trust that your physician will make the right choice for you.

To alter the course of this opioid epidemic it will take a combination of using more alternatives and delicately choosing which patients are the right candidates for these drugs. The hope is that we will find an area in the middle where prescription opioids will be available when desperately needed, but are safely kept out of the hands of those who might succumb to them.

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pleted his residency in anesthesiology and a fellowship in interventional pain management at the University of California, San Diego. To schedule an appointment with Dr. Blake, call 323-2080.

• Welcome to the World •

Births

<p style="text-align: center;">Renown Regional Medical Center</p> <p>June 12 Martin and Amber Ludwig of Reno, a son</p> <p>June 13 Taunya Fregoso of Sun Valley, a son Jeremy and Sarah Trader of Sparks, a son Anothony Gililland and Nicole Trefethren of Sparks, a son</p> <p>June 14 Matthew ad Frankie Begley of Reno, a daughter Alejandro Reyes-Varela and Adilene Martinez-Salgado of Sparks, a son Eillah Brymer of Reno, a</p>	<p style="text-align: center;">St. Mary's Regional Medical Center</p> <p>Ryan and Katherine Albert of Sparks, a son Matthew and Kristina Jeannes of Reno, a daughter</p> <p>June 17 Mathew and Kristina Lange of Sun Valley, a son</p> <p>June 7 Brandon and Jaime Vail of Reno, a daughter</p> <p>June 10 Cameron and Jennifer White of Reno, a son Clint and Skyla Post of Lovelock, a daughter</p> <p>June 12</p>
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