Taking Opioids Responsibly for Your Safety and the Safety of Others:

Patient Information Guide on Long-term Opioid Therapy for Chronic Pain

Department of Veterans Affairs (VA) and Department of Defense (DoD) employees who use this information are responsible for considering all applicable regulations and policies throughout the course of care and patient education.

Introduction

This patient guide contains important information related to how health care providers use opioids (also called “opiates” or “narcotics”) to treat chronic pain and how to take opioid medications safely. This information is important as opioids can be dangerous if not taken responsibly.

Your health care provider is required to discuss your treatment plan with you and obtain your signed consent prior to the start of long-term opioid therapy treatment. This process ensures that you and your provider are clear about the pain relief and daily function goals that you expect to achieve when opioids are a part of your treatment. Discussion about your treatment helps you to understand the possible risks and side effects of opioids and increases the likelihood that your treatment will go smoothly.

Opioids don’t work for every person or type of pain. While they reduce your pain, they are unlikely to take it away completely. Your health care provider will taper or discontinue your opioid therapy if you don’t benefit, or if the harms outweigh the benefits. You can still continue to receive pain care through use of other pain therapies.

Your Pain Care Plan

Opioids alone are not enough to treat your pain and are part of a pain care plan that uses other therapies to manage pain and improve your quality of life, such as:

- Heat and cold therapy (e.g., heating pads, ice packs)
- Stretching
- Exercise
- Weight loss
- Massage
- Acupuncture
- Chiropractic
- Nerve stimulation
- Relaxation training
- Physical therapy
- Occupational therapy
- Mental health therapy
- Cognitive behavioral therapy
- Counseling
- Rehabilitation
- Non-opioid pain medicines
- Injections
- Specialist pain care
- Surgical therapy
- Pain school or classes
- Spiritual
- Social

Any one of these therapies can help to reduce pain, but they often work better together.

Taking Opioids Responsibly

Because opioid medications can be dangerous, your provider can only prescribe them safely if you follow these “DO’s and DON’Ts” for taking opioids responsibly.

1. DO take your opioid and non-opioid pain medicines as prescribed.

Make sure you take the right dose of medication at the right time. Don’t avoid taking your pain medication to save it for a later time. Don’t take someone else’s prescriptions.

2. DON’T take extra doses.

If you take extra doses without the direction of your health care provider, you could become very sick or even die from an opioid overdose. You may also run out of your opioids before you can refill your medication. This may lead to withdrawal symptoms (see next page). Your provider will usually deny requests for early refills. This protects you and the public from harm due to opioid abuse and addiction. If you have severe, increased or new pain, don’t just take more of your opioids. Call your pain treatment provider or clinic to decide on the best care.

3. DO inform all of your providers that you are currently prescribed opioids.

4. DO tell your primary health care provider if another provider prescribes an opioid for you.

Tell your primary health care provider within 24 hours or on the next weekday if another provider prescribes an opioid (for example, for acute pain after surgery).

5. DO make an effort to remain in the care of one primary provider.

This will help ensure the right amount and type of medication is prescribed so you have optimal pain management and continued care.

6. DO tell your primary health care provider about any other health care that you are receiving from additional providers (e.g., behavioral health, interdisciplinary team).

Tell your primary care provider about all medications and supplements you currently take. This includes illegal or legal use of marijuana that providers outside VA and DoD may have prescribed. Coordination of pain management services is important to ensure your safety. You should know that your primary health care provider may choose to alter your pain management plan of care, including long-term use of opioid therapy, to take into account all care that raises safety concerns.

7. DON'T stop taking opioids on your own.

If you stop taking opioids suddenly, you may have withdrawal symptoms. If your provider asks you to slowly decrease your use of opioids, follow the provider's instructions closely. This will help reduce withdrawal symptoms and prevent you from feeling sick.

Tell your provider if you think you are having withdrawal symptoms. Your provider may be able to give you medicine for a short time to help control them. Withdrawal symptoms can include:

- Belly cramps
- Trouble sleeping
- Extra saliva
- Tears in your eyes
- Loss of appetite
- Anxiety
- Muscle aches/cramps
- Sweats
- Increased heart rate
- Nausea
- Increased blood pressure
- Runny nose
- Feeling very tired
- "Goose bumps"

8. DO be cautious about driving or operating machinery.

Avoid driving a motor vehicle or operating dangerous machinery if you feel sleepy or confused after taking a medication. State laws may determine what kinds of jobs you can do when taking opioids.

9. DON'T drink alcohol or take "street drugs."

It is not safe to drink alcohol or use illegal "street drugs" when you are taking opioids. They can impair your ability to manage your opioid therapy and cause severe harm or death. Some drugs can interfere with your pain care or opioid therapy. If you abuse alcohol or use "street drugs," your provider will encourage you to get treatment for this problem and may stop prescribing opioids. Treatment for alcohol or drug abuse will not interfere with your ability to get treatment for your pain or other conditions – and treatment for alcohol or drug abuse may be helpful.

Illegal “street drugs” include:

- Cocaine
- Heroin
- LSD
- Marijuana not medically prescribed [NOTE: It is illegal for patients to possess marijuana on federal property to include all VA and DoD facilities]
- Diverted (“black market”) prescription drugs (e.g., opioids, benzodiazepines, other controlled substances, steroids)
- Inhalants (e.g., glue, solvents, lighter fluid)
- Methamphetamine or MDMA/Ecstasy

10. DO get help from your friends and family.

Your friends and family may be able to work with your health care provider to help you manage your opioid therapy safely. Your health care provider may encourage you to involve your friends and family to learn about opioids. They may also ask for permission to contact your family about your opioid pain care. Social support is an important component of pain management.

11. DON’T sell or give away your opioids.

Don’t let other people take or use your medicines. This is dangerous, illegal and can lead to criminal charges. Keep your medicines in a safe and secure place. VA and DoD may not replace doses that are lost, stolen or shared with others. If this happens repeatedly, your provider may stop prescribing opioids to you completely.

Managing Side Effects and Risks

Possible Side Effects

It is important to report any side effects to your provider. Tell your provider if any side effects interfere with your daily activities. This information will help you and your provider develop a treatment plan that balances harms (side effects and risks) and benefits (pain relief and how well you function).

1. Sleepiness or "slow thinking"

Opioids can impair your judgment and cause problems with how you make decisions. Sleepiness may lessen over time.

2. Mental confusion, bad dreams or hallucinations

Your provider may need to change your dose or medicine to treat these side effects.

3. Constipation

This is a common side effect that may not go away. Your provider may prescribe laxatives to improve your bowel movements. Regular physical activity, a diet high in fiber and drinking more water may also help.

4. Itching

Itching is rare. It usually occurs early in treatment. Your provider may need to change your opioids and order medicine to treat itching.

5. Sweating

Wearing light clothes may help decrease sweating.

6. Nausea and vomiting

This can occur early or late in treatment and usually goes away with time. Your provider may prescribe medication to help control nausea.

7. Decreased hormones that affect sex drive, sexual arousal and other aspects of your health

Opioid use may decrease sex hormone levels and your desire to have sex. For men, opioids may decrease the ability to have an erection. People with decreased sex hormones may experience depression, anxiety, tiredness, hot flashes and night sweats. It can also cause loss of muscle mass, weakness, brittle bones (osteoporosis) and bone fractures. Women may have irregular or no menstrual periods. Use effective birth control methods to prevent pregnancy during opioid treatment. Tell your provider if you are pregnant or plan to become pregnant. Opioids may harm your baby if taken while pregnant.

8. Allergies

Allergic reactions to opioids are rare. If you get a rash or hives, call your provider or 911 right away. If you become short of breath, have throat swelling or feel like you may pass out, tell someone to call 911 right away.

Other Risks from Opioids

1. Sleep apnea

Sleep apnea is abnormal breathing pauses during sleep. This is a serious risk. Your health care provider may:

- Ask you about your sleep habits
- Order tests to check if you are at risk for sleep apnea

If you have sleep apnea, your health care provider may:

- Advise you to use only non-opioid pain therapy
- Prescribe a breathing machine to use when you go to sleep
- Advise you to avoid alcohol and medicines that may make sleep apnea worse

2. Worsening of pain

For some people, opioids may actually make pain worse.

3. Impaired driving

Opioids may affect your ability to drive a car or use other machinery safely.

- Avoid driving a motor vehicle or operating dangerous machinery if you feel sleepy or confused after taking a medication
- To ensure public safety, state laws may determine what kinds of jobs you can do when taking opioids

4. Tolerance

With long-term opioid therapy, you may need a higher dose to get the same pain relief, which may result in an increase in the likelihood of many of the other side effects and risks.

5. Withdrawal symptoms (physical dependence)

Your body will get used to receiving opioid medication. You may suffer withdrawal symptoms if you suddenly stop taking opioids, taper them too quickly or take a drug that blocks the effects of the opioids. People who take opioids for a prolonged period of time become physically dependent on them. Physical dependence is NOT the same as addiction.

6. Addiction

Some—not all—patients become addicted to opioids. Addiction occurs when a craving for a substance gets out of control. If you show any signs of addiction, your provider is likely to refer you to an addiction specialist or a substance use treatment program.

- Your provider and addiction specialist may cut back on your dose or stop opioid therapy
- They may prescribe non-opioid medicines
- They may use non-opioid treatments to help with your pain

7. Drug interactions

Sometimes there are problems when different drugs are taken together. Tell your provider about all of the different medications you take. This is includes both prescription and over-the-counter drugs, as well as herbs or vitamins. Tell your doctor if you drink alcohol.

8. Immune system changes

Your body's immune system helps fight infections. Opioids may weaken the immune system. Long-term opioid use may result in infections or immune-related illnesses.

9. Birth Defects

Opioid use during early pregnancy has been associated with an increased risk of rare birth defects. If you are or plan to become pregnant, talk to your health care provider about your pain treatment options.

10. Increased Risk of Death

Opioids are one of the main prescription drugs associated with death in the United States. Death may be more likely when you take larger doses of opioids as opioids may cause respiratory depression.

Filling Opioid Prescriptions

- Ask your health care provider how to refill or renew your opioid prescriptions.
- Fill all your opioid prescriptions in person if your health care provider asks you to do so.
- Check with your provider to ensure you know when (i.e. days and times) your prescription can be refilled.
- If you pick up your prescriptions at the pharmacy, contact your health care provider at least three business days before your next opioid prescription is due.
- Check with your provider to see if you are eligible to receive refills through:
  - My HealtheVet (myhealth.va.gov) once you have been verified to use the prescription refill section of My HealtheVet
  - TRICARE Pharmacy Program (express-scripts.com/TRICARE/)
- When ordering by mail:
  - Contact your health care provider or pharmacy at least 10 business days before your refill is due
  - Receive all your mailed prescriptions at a safe address. If you don't have a safe address to receive your opioids by mail, pick them up at the pharmacy
  - Make sure that no one else can sign for or pick up your prescription

Protect Your Opioids From Damage, Loss and Theft

- Keep your opioids in a safe, locked place, out of reach of family, children, visitors and pets.
- Always store your opioids in the original labeled container.
- If you travel, carry the current prescription in the pharmacy labeled bottle. This will help you answer any questions about your medicine.
- If you are concerned about the safety of storing medicines in your home, tell your provider so you can talk about how to handle this problem.

- If someone steals your opioid or prescription, report the theft to the police. If you will be needing a refill or new prescription sooner than usual, give your provider and pharmacy a copy of the police report so they will know why there is a need sooner than expected. It is helpful to make sure no one else can sign for your prescription or take it when delivered by mail.

Working Together with Your Provider

- Be honest with the health care team and treat them with respect. The team will be honest with you and treat you with respect as well.
- Be honest and thorough when you report your health, drug and alcohol history.
- Speak up about your questions and concerns with your provider. Your provider wants to answer your questions.
- Tell all of your providers the names of the medical centers/clinics where you receive opioids.
- Same-day care or emergency rooms are not ideal places to get treatment for chronic pain. If you have to go to an emergency room, tell the doctor about your pain care plan.
- Follow your pain care plan. Your plan may include certain tests and other ways to manage your pain. Do all the things that you and your provider agree to as part of your plan.
  - You will need to meet with your doctor at least once per month upon starting opioid therapy and at least every six months once your treatment is stable. Try to keep current with all of your pain care and other clinic visits if possible. When taking opioids, you should give your provider a phone number and address where he or she can reach you. Please update your contact information at every visit if it changes.
- With your consent, your provider and other health care team members may order urine or blood tests to ensure that you take your opioids as prescribed and that they get into your body. In some people, the body does not absorb the opioid well. The tests also check if your urine or blood contains drugs not prescribed for you like "street drugs" and alcohol. The VA and DoD medical systems do not use these tests for law enforcement or employment purposes when related to your patient care. (However, service members need to be aware that providers are obligated to inform commanders about any issues that impact the service members fitness for duty to ensure the safety of the public). The results of these tests may cause your provider to talk to you about keeping or changing your plan.

If You Have to Stop Opioid Therapy

- If your provider stops your opioids because the medication is not helping you or because of addiction, abuse or misuse, your provider will offer other forms of treatment for pain or substance use problems.
- If you have to stop your opioids, your provider will try to prevent or control any withdrawal symptoms. This typically, but not always, requires slowly lowering the dose.

Prescription Drug Monitoring Programs

- For your safety, your provider and pharmacist will monitor when you renew and refill your opioids, both within the VA or DoD and, when allowed or required by law, outside the VA or DoD.
- Most states have programs that track prescription drugs to identify and address inappropriate or unsafe patterns of controlled drug use.
- The VA and DoD will not give your information to a prescription drug monitoring program without your specific consent, except when allowed by law.

Notes

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