

# Chronic pain and emotional distress often treated with risky medications

November 13 2013, by Sharyn Alden

---



People suffering from chronic non-cancer pain and severe emotional distress, such as depression, anxiety and substance use, are likely to receive long-term opioid therapy despite a lack of evidence that this treatment helps, reports a new review in *General Hospital Psychiatry*. The review also noted serious unmet needs for psychiatric care for people with chronic pain.

"Patients with severe emotional issues are likely to receive high-dose, high-risk opioid regimens for [chronic pain](#) over a long period of time," said the review's lead author Catherine Q. Howe, M.D., PhD., assistant professor in psychiatry at the University of Washington School of Medicine in Seattle. But, she added, these [patients](#) tend to do poorly with

opioid therapy. Adverse outcomes may include misuse and abuse of opioids and even overdose and death.

Other studies have suggested that mental health disorders are not solely a reaction to chronic pain. They also predispose individuals to the development of chronic pain. There may be common factors such as childhood abuse and neglect that increase the risk of chronic pain, substance use and [mental health disorders](#).

The Institute of Medicine estimates that 100 million Americans suffer from chronic pain. In the past 15 years, use of long-term opioid therapy for chronic non-cancer pain (CNCNP) has quadrupled.

Researchers reviewed various studies culled from pain clinics, patient surveys, including phone surveys and health insurance files. They defined frequent opioid use as taking [opioid drugs](#) several times a week for one or more months over a calendar year. People with psychiatric disorders were more likely to use prescription opioids.

"What these patients really need is psychiatric care instead of the de facto treatment of opioids," Howe explained. "When psychiatric services aren't available, patients often end up on [opioid therapy](#) because the drugs numb the [emotional pain](#) as well as providing temporary relief for [physical pain](#)."

Bankole Johnson, DSc., M.D., chairman of the department of psychiatry at the University of Maryland School of Medicine agreed with the study's findings but said the use of opioids was not so much an epidemic as an "overuse of psychotropic drugs."

He added, "It's not clear what the alternatives are for patients when pain is not controlled. The crux is to provide integrative pain care so patients go into remission without the overuse of psychotropic drugs."

Johnson said the study raises the importance of an integrative approach when managing pain care. "The mind and body are closely tied together," he noted. "Doctors sometimes forget that—that pain is an emotional state, which is why people have different pain thresholds."

Provided by Health Behavior News Service

Citation: Chronic pain and emotional distress often treated with risky medications (2013, November 13) retrieved 25 April 2024 from <https://medicalxpress.com/news/2013-11-chronic-pain-emotional-distress-risky.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.