

# Many back pain patients get limited relief from opioids and worry about taking them

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Millions of people take opioids for chronic back pain, but many of them get limited relief while experiencing side effects and worrying about the stigma associated with taking them, suggests research presented at the Anesthesiology 2016 annual meeting.

More than 100 million people in the United States suffer from [chronic pain](#), and those with chronic low back pain are more likely than patients with other types of pain to be prescribed [opioids](#). Unfortunately, these medications are addictive and can cause side effects, ranging from drowsiness to breathing problems.

"Patients are increasingly aware that opioids are problematic, but don't know there are alternative treatment options," said Asokumar Buvanendran, M.D., lead author of the study, director of orthopedic anesthesia and vice chair for research at Rush University, Chicago, and vice chair of the American Society of Anesthesiologists (ASA) Committee on Pain Medicine. "While some patients may benefit from opioids for [severe pain](#) for a few days after an injury, physicians need to wean their patients off them and use multi-modal therapies instead."

In the study, 2,030 people with low back pain completed a survey about treatment. Nearly half (941) were currently taking opioids. When asked how successful the opioids were at relieving their pain, only 13 percent said "very successful." The most common answer - given by 44 percent - was "somewhat successful" and 31 percent said "moderately successful." Twelve percent said "not successful."

Seventy-five percent said they experienced side effects including constipation (65 percent), sleepiness (37 percent), cognitive issues (32 percent) and dependence (29 percent).

Respondents also had concerns about the stigma associated with taking opioids. Forty-one percent said they felt judged by using opioids. While 68 percent of the patients had also been treated with antidepressants, only 19 percent felt a stigma from using those.

A major pharmaceutical company recently agreed to disclose in its promotional material that narcotic painkillers carry serious risk of addiction and not to promote opioids for unapproved, "off-label" uses such as long-term back pain. Researchers also note a lack of solid studies on the effectiveness of opioids in treating back pain beyond 12 weeks.

Patients with chronic [low back pain](#), [persistent pain](#) lasting more than three months, should see a [pain](#) medicine specialist who uses an approach that combines a variety of treatments that may be more beneficial, said Dr. Buvanendran. These treatments include physical therapy, bracing, interventional procedures such as nerve blocks, nerve ablation techniques or implantable devices, other medications such as anti-inflammatories and alternative therapies such as biofeedback and massage, he said.

Provided by American Society of Anesthesiologists

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