

Opioid prescribing for analgesia after common otolaryngology operations

April 6 2021



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The American Academy of Otolaryngology-Head and Neck Surgery Foundation published the Clinical Practice Guideline: Opioid Prescribing for Analgesia After Common Otolaryngology Operations



today in *Otolaryngology-Head and Neck Surgery*. This specialty-specific guideline provides evidence-based recommendations on postoperative management for pain in common otolaryngologic procedures, with a focus on opioids.

"As otolaryngologist-head and neck surgeons, we can help reduce the risk of <u>opioid</u> use disorder among our patients and their families," said Samantha Anne, MD, MS, Chair of the Guideline Development Group (GDG). "This clinical practice guideline focuses on multimodal analgesia and judicious use of opioids for common otolaryngology procedures."

Opioid use disorder (OUD), which includes misuse, abuse, and overdose of opioids, is an epidemic in the United States. According to data from the National Survey on Drug Use and Health, more than six million people ages 12 or older misuse prescription pain relievers in a given year in the United States. Additionally, studies have shown that there is a significant risk of chronic opioid use even when used as short-term treatment for pain.

The guideline addresses assessment of patients for OUD risk factors, counseling on pain expectations, and identifying factors that can affect pain duration and/or severity. It also discusses the use of multimodal analgesia as first-line treatment and responsible use of opioids. In addition, the guideline highlights quality improvement opportunities in postoperative pain management of common otolaryngologic surgeries. Employing the key action statements from this <u>clinical practice guideline</u> (CPG) can help to reduce the variation in care across the specialty of otolaryngology and improve postoperative pain control while reducing the risk of OUD.

"Many times, opioids are prescribed in excessive quantities for procedures that are associated with mild-to-moderate <u>pain</u>, such as



parathyroidectomy, thyroidectomy, and otologic surgeries. The number of opioids prescribed for these procedures can be reduced, especially if appropriate multimodal analgesia is used," says Dr. Anne. "The guideline also emphasizes the importance of counseling patients and identifying patient- and procedure-related factors that can inform shared decisionmaking."

More information: Samantha Anne et al, Clinical Practice Guideline: Opioid Prescribing for Analgesia After Common Otolaryngology Operations, *Otolaryngology–Head and Neck Surgery* (2021). DOI: <u>10.1177/0194599821996297</u>

Provided by American Academy of Otolaryngology

Citation: Opioid prescribing for analgesia after common otolaryngology operations (2021, April 6) retrieved 2 May 2024 from https://medicalxpress.com/news/2021-04-opioid-analgesia-common-otolaryngology.html

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