Opioids: Safe Use and Side Effects

Your doctor has prescribed an opioid (OH-pee-oyd). This drug can control moderate to severe pain without increased risk of bleeding and kidney problems. Always take the right dose at the right time. **Do not wait for pain to get worse before you take a dose.**

This drug and others of the same type are narcotics (nar-KOT-ix). Strict laws control their use. You break federal and state laws if you give or sell this drug to any other person.

Be careful when you drive or use any type of machine. The drug can affect your judgment and response time.

Use birth control and keep from getting pregnant. If you become pregnant, keep taking this drug as prescribed. Tell your doctor as soon as you find out you are pregnant.

Take the exact dose your doctor orders. Stay on a strict schedule if you can. If you skip a dose, it may be harder to get your pain back under control. If you take too much at a time or more often than prescribed, you risk severe side effects and death.

**Side effects**

Constipation is a common side effect when you take this type of drug. Exercise, change your diet and drink more fluid to ease this problem. Other side effects differ from person to person.

Common short-term effects include:

- Nausea (upset stomach)
- Itching
- Sweating
- Depression

The drug may affect how you breathe when you sleep (sleep apnea) or your level of male sex hormone (testosterone).

**Interaction with other drugs and alcohol**

For your safety, talk to the doctor who prescribes opioids for you before you take any other medicine. This includes:

- Drugs prescribed by other doctors
- Over-the-counter drugs for colds, coughs, headaches and other symptoms of illness or stress
- Herbal products
- Drinks or powders for weight loss or gain
- Drinks or powders for increased energy or strength
- Anti-anxiety drugs
- Sleeping pills

**Never drink alcohol at any time while you are taking opioids. You risk your life when you drink.**
Drug tolerance
You rely on this drug to relieve pain that made you seek help from your doctor. Taking this drug does not make you an addict, but you should be aware of that risk. Use can become abuse if you do not take the drug just as your doctor says. (If you are taking this drug to manage pain for 2 to 4 weeks after surgery, chances of drug abuse are very slim.)

If you take this drug for chronic pain, your body may adapt to it as time goes by. This is called increased tolerance. You may need larger doses to get the same level of relief. Talk with your doctor if this happens. You might want to explore other methods of pain control.

Do not take a much smaller dose or stop taking the drug all at once. You are likely to have these withdrawal symptoms:
- Nausea
- Vomiting
- Diarrhea
- Pain in your belly (abdomen)
- Feeling restless (agitation)

Opioid-induced hyperalgesia
(hy-per-al-JEE-zee-uh)
This odd problem may evolve slowly during long-term use of opioids. Sensitivity to pain may increase in one or both of these ways:
- Your pain may no longer be controlled.
- You may become super sensitive to a situation, substance or surface that has not hurt you in the past.

For either reason, you may need to stop taking opioids. Your doctor will talk with you about other drugs or pain control methods. Please contact your provider if you feel like you are having these symptoms. You may need to be seen in the clinic for an exam and review of symptoms.

Physical dependence
This may occur with many types of medicine – not just opioids. Physical dependence does not mean you are addicted. When you take the same medicine over and over, your body gets used to it. Organs and systems adapt to the medicine being present all the time. Body functions change in ways you do not notice. Discuss your concerns with your provider. Do not increase your medicine unless your provider tells you to do this.

Your body is likely to react if you stop taking the medicine all at once. You may feel sick to your stomach or have headaches and other symptoms. This is called withdrawal response. The withdrawal response to opioids differs from person to person. Please contact your provider if you feel like you are having these symptoms. You may need an exam and review of symptoms in the clinic. Your provider will decide if you are dependent and discuss your treatment options.
Warning signs of addiction
Addiction is a chronic disease. Your body and mind depend on a drug because of genetic, psychosocial and environmental factors. You may be addicted when one or more of these are true:
• You have little or no control over drug use.
• You take more of a drug than is prescribed
• You ask for early refills.
• You have prescriptions filled at more than one place.
• You use other substances that affect your mind or body.
• You crave the drug even though you know it can harm you.
• You forge prescriptions.
• You borrow or share drugs with others.
• You need to have prescriptions replaced because drugs have been “stolen.”

State and federal laws forbid your doctor to prescribe an opioid if you show any of these signs. In the course of your care, you will be asked for samples of your urine, breath, saliva, blood or hair. We are required by law to test these for the presence of drugs. Drug screens can be done on any day without advance warning. This is for your safety.

Set reasonable goals for pain control
Total freedom from pain may not be achieved with this or any drug. This is not a realistic goal. Even at high doses, a drug may not keep your pain at a level you can stand. Needing greater doses may mean you have a physical or mental addiction to the drug. Use of this drug to control your pain may have to end when one or more of these are true:
• You do not get enough pain relief to lead a normal daily life.
• Side effects do not go away after you adjust to the drug.
• You have not achieved treatment goals.
• You need or want higher doses.
• You cannot abide by terms of your treatment agreement.

Contact information
8 a.m. to 5 p.m. weekdays
Call the number(s) written here by the staff member who reviews this handout with you.

Department and clinic
_____________________________
(608) 775- ___________ or
(800) 362-9567, ext. _______________ or
( _____) ___________________________

After hours, weekends and holidays
Telephone Nurse Advisor
(608) 775-4454 or (800) 858-1050
Rate and Record Your Pain Level

How much pain do you feel? When does it bother you the most or the least? Write down how activities and medicine affect your level of pain. This record can help your health care team adjust your dose and timing to manage pain better. **Choose one scale.** Use it each time you complete a line in your Pain Control Log.

- Rate your pain level. Write the number in Column 3 before you take medicine.
- In Column 4, make notes about what you are doing at the time you take medicine.
- **Wait 1 hour.** Rate your pain level and fill in Column 6.
- **Wait 2 more hours and fill in Column 7.**
- Fill in columns 8 and 9 if you use other methods such as heat, ice, stretching, deep breathing, meditation, etc.

---

**Choose a number from 0 to 10 that describes your pain.**

```
<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distressing Pain</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>Unbearable Pain</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
```


**Choose the face that shows how you feel.**

```
<table>
<thead>
<tr>
<th>Face</th>
<th>0</th>
<th>2</th>
<th>4</th>
<th>6</th>
<th>8</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No hurt</td>
<td>Hurts Little Bit</td>
<td>Hurts Little More</td>
<td>Hurts Even More</td>
<td>Hurts Whole Lot</td>
<td>Hurts Worst</td>
</tr>
</tbody>
</table>
```

# Pain Control Log

Check the pain scale you use all the time: ____Bar marked 0 to 10     ___ FACES scale (You can enter numbers in between, such as 1,3,5,7,9.)

<table>
<thead>
<tr>
<th></th>
<th>Date</th>
<th>Time</th>
<th>Pre-dose pain level</th>
<th>What are you doing?</th>
<th>Med(s) &amp; Dose</th>
<th>Pain level after 1 hour</th>
<th>Pain level after 3 hours</th>
<th>Other pain control methods used?</th>
<th>Pain level after other methods</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Copyright 2013 – Gundersen Health System Patient Education. This content supports the care you receive from your health care team. It does not replace medical care or advice. Talk to your doctor or others on your health care team before you start any new treatment.
How to Prevent Opioid Constipation

Opioids (OH-pee-oyds) are narcotics. They are some of the stronger drugs for pain. Common names are morphine, hydromorphone, OxyCODONE™ and methadone. There are other brand names, too.

Like many other pain relief medicines, these can make you constipated. Your bowels are less active than normal when you take these drugs. You could have belly pain or a harmful blockage if stools become hard and slow to move. A severe blockage could injure your bowels.

Stay ahead of this problem. Take a stool softener and a gentle laxative. Soft stools move easily through your bowels. A laxative makes your bowels move more often. Take more tablets if your doctor increases your opioid dose. You need more of this medicine than what is required to manage constipation caused by what you eat.

If you become constipated, contact the doctor who prescribes your opioids. You may need to be on a bowel program. A common bowel program includes:

- 1 to 3 tablets of docusate sodium (100 to 300 milligrams) each day, plus
- 2 to 6 tablets of senna 2 times each day.

Start with docusate (DOK-u-sate) and senna unless your healthcare team suggests a different pair of drugs. Buy them as a combination or buy them separately.

In general, we advise you not to use products like Metamucil™ and Fiberall™. High fiber or bulk forming laxatives require you to drink a lot of water. They absorb water and expand. If you do not drink enough water, stools may harden and not move as well through your bowel. Taking these products with too little water can make your problem worse.

<table>
<thead>
<tr>
<th>Stool Softeners</th>
<th>Gentle Laxatives</th>
<th>Other Bowel Movers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Docusate sodium</td>
<td>Natural senna tablets</td>
<td>Combined stool softener and laxative</td>
</tr>
<tr>
<td>Generic or brand like Colace®</td>
<td>Generic or brand like Senokot®</td>
<td>Generic or brand like Peri-Colace®</td>
</tr>
<tr>
<td>Docusate calcium</td>
<td>Bisacodyl (bis-a-KOe-dil) tablets</td>
<td>Milk of magnesia</td>
</tr>
<tr>
<td>Generic or brand like Surfak®</td>
<td>Generic or brand like Dulcolax®</td>
<td>Liquid or chewable tablets, generic or brand</td>
</tr>
</tbody>
</table>

If you are already constipated
Try a suppository. Put it in your rectum (bottom) to help your bowels move. Use one or both types:

- A bisacodyl suppository if you think stool is soft
- A glycerin suppository if you think the stool is hard.

You can buy them over the counter at any drug store. You may have to take both types to get results. If your bowels do not move, contact your doctor’s office that day. Do not give yourself an enema unless you are told to by your doctor or nurse.
**Chronic Pain Management: Your Role in Your Care**

Take an active part in your health care. Work with us to set short and long term goals.

Be responsible for storing your pain medicines in a safe place. Lock them up if you need to. Keep them in a secret place only you can find.

Be open and honest with the people who care for you. We cannot help what we do not know.

Decide who must know what medicine you take. You do not have to tell every person you know.

Accept this fact: There is no quick fix. Your problems will not go away if you get pain pills.

Listen to your doctor, nurse and therapist. Take time to think about what they say. Do not jump to conclusions. Try not to assume things that may not be true.

Look at all areas of your life. Think about how they connect. Pain is one issue. Find and work on other issues that ease your pain or make it worse.

Think about what triggers your pain. How can you stay away from these triggers or keep them from happening near you? Can you control the way you react? Have you tried to do this? Have you been taught to do this? Would you be willing to learn?

Be honest with yourself. How many of your problems do you blame on pain?

Ask yourself: How can I make my life better each day without depending on medicine? What can I do with my hands, my feet or my mind to keep from thinking about my pain? Are there people I like to be with? Could I help someone else and help myself at the same time?

Think about what might prevent pain? You can choose to:
- Be active and eat healthy food.
- Get enough rest.
- Drink responsibly or not at all.

Be honest with yourself. How many of your problems do you blame on pain?

What lifestyle changes can you control that might prevent pain? You can choose to:

Take care of your body. Know your own signs of good health and comfort. Notice when signs change to illness or stress. Think about what happened to cause the change.

Keep a record of your pain. Write down what happened before pain began. What happened as your pain got worse? What did you do? When the pain was over, what happened next?