

OPIOID MANAGEMENT

IN CHRONIC PAIN

ENFORCED OPIOID TAPERING

Due to the recent opioid reforms and changes to guidelines, many individuals living with chronic pain have been subjected to, often dangerous, forced tapering. Discontinuing opioid therapy for chronic pain is not always possible or safe. In the only study investigating the tapering of opioids for chronic pain, the cohort that discontinued opioids did not reduce the risk of death. Instead, there was an increased risk of overdose death (J Gen Intern Med 2019). Chronic Pain Australia strongly advocates that tapering opioid therapy should only occur where the individual has agency to:

- 1 Agree to trial tapering opioid therapy to “the lowest possible dose.”
- 2 Determine the pace of tapering
- 3 Decide when to pause tapering, and have an
- 4 Ability to return to the previous effective opioid dose if pain and function deteriorates (The Journal of International Association for the study of Pain 2022)



OPIOID MANAGEMENT OPTIONS

Gradual opioid tapering

Small reductions to opioid therapy over an extended period of time. As a general guide, no more than 10mg oral morphine equivalent every 2-6 weeks depending on the individual.

Opioid rotation

Opioid rotation is where one opioid is replaced with an alternative opioid. This can be a helpful strategy in the long term use of opioids to reduce tolerance, maintain analgesia and reduce potential harms and side effects of opioids.

Rapid opioid withdrawal

Some people want to reduce or cease opioids rapidly due to side effects or as a personal goal. A type of opioid called buprenorphine can be used to assist people who would like to rapidly withdraw from opioids. The benefit of this is that they can withdraw over a 2-4 week period and buprenorphine generally prevents any uncomfortable withdrawal symptoms. This treatment requires and Addiction Medicines Specialists.



B.R.A.N.

BENEFITS

ALTERNATIVES

RISKS

NOTHING

BRAN can be a useful communication tool to assist in the decision making process between you and your doctor when considering a new treatment or change in therapy. BRAN stands for 'Benefits', 'Risks', 'Alternatives' and do 'Nothing'.