

Quality Standards

Patient Reference Guide



Opioid Prescribing for Chronic Pain

Care for People 15 Years of Age and Older

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DRAFT

**Health Quality
Ontario**

Let's make our health system healthier

Quality standards outline what high-quality care looks like. They focus on conditions where there are large variations in how care is delivered, or where there are gaps between the care provided in Ontario and the care patients should receive.

This guide addresses areas of opioid prescribing for chronic pain that need attention in our province. It is based on the best available evidence from clinical practice guidelines and was created in partnership with people who have experienced chronic pain and health care providers.

This guide is for people with chronic pain and their caregivers—to know what to ask for when receiving treatment and to ensure they receive the highest-quality care.

Chronic pain is often defined as pain that lasts more than 3 months. There are a lot of different conditions that can cause chronic pain. Two of the most common conditions are arthritis and lower back pain, but there are many others as well.

Living with chronic pain can be very hard for you and your caregivers. There are also many ways to treat chronic pain, such as physical therapies, psychological therapies, and medications.

Opioid medications, such as oxycodone, hydrocodone, codeine, morphine, and fentanyl, should not be the first choice for treatment because of their serious risks including addiction, overdose, and death. Other nonopioid treatments should be tried first.

If you or someone you care about has been prescribed or is considering opioids for chronic pain...

You can use this guide to work in partnership with your health care professionals to develop a care plan that works for you and that lowers your risk of being harmed by opioids.

Use this information to learn what high-quality care looks like, to ask informed questions about opioids that may be prescribed for chronic pain, and to learn about other types of care that may help.

What to Discuss With Your Care Provider

Assessing Chronic Pain and Setting Goals

- If you are taking opioids or considering taking opioids, your health care professional should ask you about your pain, your health, your ability to function at work and at home, and any other issues that may be affecting your health.
- Your health care professional should work with you to set goals for managing your pain.

The conversation about goals should focus on what matters to you—including reducing your pain, improving your ability to function at work and at home, and other goals that are important to you.

Alternatives to Opioid Medications

- A combination of physical therapies, psychological therapies, and nonopioid medications is the first choice for treating chronic pain. Your health care professional should offer you these therapies before offering opioids.

Starting and Stopping Opioid Medications

- Your health care professional should explain the potential benefits and harms of opioid therapy and other nonopioid therapies for chronic pain so that you can make decisions about your care together. If you have family or others involved in your care, they should also receive this information. Potential harms of opioid therapy include addiction and overdose.
- If you currently have a drug or alcohol addiction or a mental illness, or if you had a drug or alcohol addiction in the past, the risks of harm from opioids are higher, and you should discuss these risks with your health care professional.
- To make sure you receive the safest treatment, your health care professional and pharmacist will check your prescription history before prescribing or dispensing opioids. They do this to see if you have recently been given opioids or other medications that are dangerous to combine with opioids, such as benzodiazepines (for example, alprazolam, diazepam, or lorazepam).
- If taking an opioid poses an acceptable risk, your starting dose should be as low as possible to improve your pain and ability to function.
- Whenever possible, you should not take opioids and benzodiazepines (for example, alprazolam, diazepam, or lorazepam) at the same time. When taken together, these medications may increase your risks of overdose and death.
- There is a risk of becoming addicted to opioids. If opioids are having a negative impact on your life or putting you at risk of harm, talk to your health care professional.
- Your health care professional should monitor your use of opioids carefully and help you stay on the lowest possible dose.

- Your health care professional should talk to you about reducing your opioid dose or stopping opioid therapy if:
 - You have been taking opioids for 3 to 6 months or longer
 - Your pain is not improving
 - You are having problematic side effects
 - You are on a high dose of opioids
 - You want to reduce your dose or stop taking opioids
- It is dangerous to abruptly stop taking opioids. If you cut down or stop too quickly, you may experience uncomfortable physical symptoms such as diarrhea, insomnia, muscle aches, nausea, and vomiting. Your health care professional will work with you to develop a plan to minimize uncomfortable symptoms when reducing or stopping your use of opioids.

Everybody is different, and some statements may not apply in your situation. If you have questions about your care, **it is important to speak with your health care professional.**

Looking for more information?

Please contact us at qualitystandards@hqontario.ca if you have any questions or feedback about this patient reference guide.

A more detailed version of this quality standard, written for health care professionals, is available on our website. You can find it at hqontario.ca.

About Health Quality Ontario

Health Quality Ontario is the provincial advisor on the quality of health care. We are motivated by a single-minded purpose: **Better health for all Ontarians.**

Our quality standards are concise sets of statements outlining what quality care looks like for conditions where there are large variations in how care is delivered, or where there are gaps between the care provided in Ontario and the care patients should receive. They are based on the best available evidence and are developed in collaboration with clinical experts from across the province and patients and caregivers with lived experience with the condition being discussed.

For more information about Health Quality Ontario and our quality standards, visit: hqontario.ca.

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