

What patients can do when doctors opt for risky painkillers

15 March 2016, by Mike Stobbe



This Feb. 19, 2013, file photo, shows OxyContin pills arranged for a photo at a pharmacy in Montpelier, Vt. Prescription painkillers should not be a first-choice for treating common ailments like back pain and arthritis, according to new federal guidelines designed to reshape how doctors prescribe drugs like OxyContin and Vicodin. Amid an epidemic of addiction and abuse tied to these powerful opioids drugs, the CDC is urging general doctors to try physical therapy, exercise and over-the-counter pain medications before turning to painkillers for chronic pain. (AP Photo/Toby Talbot, File)

New federal guidelines are out for doctors who prescribe power prescription painkillers, aimed at curbing their abuse and addiction. Experts say there are things patients can do to guard against problems.

The voluntary advice from the Centers for Disease Control and Prevention is for primary care doctors, not for specialists treating <u>severe pain</u> from cancer or other diseases.

TALK TO YOUR DOCTOR

Learn about the drugs first, and don't be afraid to ask a lot of questions. "Beginning treatment with

an opioid is a momentous decision," and can carry more risks than benefits, said CDC director Dr. Tom Frieden.

TRY OTHER OPTIONS FIRST

Consider other ways to manage pain. Physical therapy, psychological therapy, and exercise can help in some situations. So can other medications, like acetaminophen or ibuprofen.

START LOW, GO SLOW

If you need <u>powerful painkillers</u> like OxyContin or Vicodin, start with the lowest effective dose for a limited period. Experts say risks increase with the dosage and the length of time a patient is taking the drugs.

BEWARE A DRUG MIX MENACE

Make sure your doctor knows if you are taking Valium, Xanax or other benzodiazepine sedatives for anxiety, insomnia or other conditions. Opioids and benzodiazepines can be a particularly dangerous combination.

SET A LIMIT

Agree on a timetable with your doctor for evaluating the benefits and harms of the drugs. Opioids often are needed no longer than a week for <u>acute pain</u>. And often they are a bad choice for <u>chronic pain</u>, Frieden said.

Online:

CDC page on patient <u>pain</u> management: <u>www.cdc.gov/drugoverdose/presc ...</u> <u>bing/managepain.html</u>

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