

Despite crisis patients perceive opioids as superior and expect them for postsurgical pain

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Even with concerns about addiction, side effects and the other risks of opioids dominating headlines, a study presented at the [ANESTHESIOLOGY 2018](#) annual meeting found people expect to be prescribed opioids and perceive them to be the most effective form of pain relief after surgery. Interestingly, other research presented at the meeting found opioids led to complications such as increased pain, poorer quality of life and dependence following back surgery.

While opioids may effectively relieve [pain](#) after surgeries and procedures, they may not be the best option in all cases. Opioids can be highly addictive and carry some risks and side effects, such as sleepiness, constipation and nausea, as well as life-threatening shallow breathing and slowed heart rate, which may indicate an overdose.

"Patients often assume they will receive opioids for pain, believing they are superior, and therefore may pressure physicians to prescribe them after surgery," said Nirmal B. Shah, D.O., lead author of the first study and an anesthesia resident at Thomas Jefferson University Hospital, Philadelphia. "But research shows opioids often aren't necessarily more effective. Clearly, we need to provide more education to bridge that gap and help patients understand that there are many options for [pain relief](#) after surgery, including other pain medications such as acetaminophen and ibuprofen."

Patients expect opioids after surgery, study finds

In the first study, researchers set out to understand expectations of pain management after surgery. They gave a 13-question survey to 503 adults who

were scheduled to have surgery for the back, ear-nose-and-throat, abdomen, or hip or knee replacement.

Everyone responded that they expected to receive pain medication after surgery:

- 77 percent expected opioids, such as morphine, fentanyl and dilaudid
- 37 percent expected acetaminophen, such as Tylenol
- 18 percent expected a non-steroidal anti-inflammatory (NSAID), such as Motrin

The majority of patients believed opioids would be most effective, even if they didn't expect to receive them: 94 percent of those who assumed they would get opioids thought they would be effective, as did 67.5 percent of those who didn't expect to receive them. Only 35.6 percent of patients expecting to receive acetaminophen thought it would be effective and 53.1 percent of those expecting to receive NSAIDs thought they would be effective.

"In previous [opioid](#) research, we found only 10 percent of people were worried about respiratory problems and 40 percent were concerned about nausea or constipation," said Dr. Shah. "We believe there is a lack of education and understanding of the dangerous side effects of these drugs, which contributes to the epidemic."

Opioids associated with complications after back surgery, study finds

In the second study, researchers analyzed nine papers that assessed opioid use in managing pain after spinal fusion (back) surgery. Interestingly, many of the findings contradict the assumptions of the patients in the first study. Findings included:

- Those whose postsurgical pain was managed with opioids had higher postoperative pain scores and worse quality of life than those who managed their pain through non-medication regimens such as exercise.
- Those who used opioids before surgery were six times more likely to use opioids long-term after surgery.
- The longer [patients](#) used opioids prior to surgery, the longer they needed them after surgery.
- Opioid use before surgery was associated with increased risk of opioid dependence 12 months after surgery.
- Those who used opioids before surgery were more likely to have surgical site pain after the procedure.
- Those who used opioids to manage pain before surgery stayed in the hospital longer after surgery, and were more likely to be readmitted after they had been discharged.

"Our review suggests there hasn't been much clinical emphasis on alternative methods to manage pain after back surgery," said Ramneek Dhillon, M.Sc., lead author of the study and a medical student at the University of Toledo College of Medicine and Life Sciences, Ohio. "While we looked at research on opioid use after spinal [surgery](#), we believe these complications likely occur after other surgeries as well."

Provided by American Society of Anesthesiologists

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