g Goodfellow Gems are chosen by Goodfellow Director, Bruce Arroll to be either practice changing or thought provoking. You are being mailed these as you are a member of the Goodfellow learning community.

Hi Andrea, here is your latest Gem

Guidelines for prescribing opioids for chronic non-malignant pain

Non-opiates and non-pharmacological therapy are first line treatment for chronic non-malignant pain (CNMP).[1] There is a useful two page CDC summary[2] and a NICE guideline.[3]

- Good CNMP management includes psychological therapy. Pharmacological therapy has poor evidence beyond the acute pain management stages.
- Opioids are rarely first-line or routine therapy for CNMP.
- Before starting opioids check expectations for pain and function, and zero pain is not the goal. Check for history of all drug dependence or intoxication.
- Start with short acting first.
- Extreme caution when going above ≥ 50 morphine milligram equivalents/day.
- Long term use often starts with acute pain so prescribe the lowest effective dose of short acting – 3 days or less will often be sufficient and more than 7 days rarely needed.
- There is no particular advantage for oxycodone over morphine.

This Gem has been checked by Dr Linda Bryant, Clinical Pharmacist.

References:

1. CDC Guideline for Prescribing Opioids for Chronic Pain 2016. Click here
2. Summary: CDC Guideline for prescribing opioids for chronic pain. Click here
3. Medicines optimisation in long-term pain NICE 2017. Click here

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