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Prescription Opioids: A Band-Aid for Chronic Low Back Pain

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Prescription Opioids: A Band-Aid for Chronic Low Back Pain

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Abstract

Pain is one of the most common reasons patients seek medical care in the outpatient clinic and emergency department setting.

In the last decade, per the Centers for Disease Control (CDC), prescription drug abuse and overdose, specifically opioids, has become the leading cause of injury and death in the United States.

“Opioids—primarily prescription pain relievers and heroin—are the main driver of overdose deaths and were involved in 26,047 deaths in 2014...opioid overdoses have quadrupled (an increase of 200%) since 2000” (Rudd et al. 2016).

Increased opioid prescription directly correlates to increased opioid deaths over the last fifteen years. These numbers also correlate with the number of heroin deaths.

In 2016 the CDC established guidelines of clinical practice regarding management of chronic low back pain (CLBP).

Clinical evidence shows treatments such as physical therapy, chiropractic care and cognitive behavioral therapy provide positive outcomes.

Introduction

Pain is defined as “an unpleasant sensory and emotional experience associated with actual or potential tissue damage” (Kivvak et al., 2016).

Acute (present for < 3 months)

Chronic (> 3 months)

“Chronic neck and back pain are conditions that people live with the longest” (Slade et al., 2016).

Management of CLBP is multifaceted.

Research Questions

Complementary Alternative Medicine (CAM)

Summary of the Problem

Increased opioid prescription directly correlates to increased opioid deaths over the last fifteen years. These numbers also correlate with the number of heroin deaths.

Studies have shown, despite the use of prescription opioids, chronic pain remains prevalent.

Table 1

<table>
<thead>
<tr>
<th>Condition</th>
<th>Estimated Incidence in United States</th>
<th>Incidence Risk Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic pain</td>
<td>25.6 million diagnosed &amp; treated low back pain</td>
<td>25.6 million</td>
</tr>
<tr>
<td>Opioid</td>
<td>11.5 million</td>
<td></td>
</tr>
<tr>
<td>Acetaminophen</td>
<td>11.5 million</td>
<td></td>
</tr>
<tr>
<td>NSAID</td>
<td>11.5 million</td>
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</tbody>
</table>

Complementary therapies such as TENS units, acupuncture, and massage therapy show no adverse effects and are effective for pain relief.

Function statement

Thorough patient screening and monitoring provide positive outcomes.

Conclusion

Limited studies are available regarding the effects of complementary therapies for CLBP. Experts recommend that further studies on alternative and complementary therapies should be conducted to prove efficacy and clinicians should be educated on these safe and effective alternatives to prescription opioids.

Diligent use of your state’s prescription drug monitoring program.

References


A pdf file with the references is available online at: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC6652778/

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