# **Tips for Pain Management**

- ➤ Be honest about what you're experiencing and ask for help when you need it.
- ➤ Share your preferences for pain relief and any concerns about how pain might affect your recovery.
- ➤ Ask a doctor or pharmacist before starting, stopping or adjusting a medication.
- ➤ Make a personal pain plan with your healthcare team in case you are injured or need unplanned surgery.
- ➤ Fear, anxiety, and stress can make pain worse. Identify and manage emotions to help with relief.
- ➤ Make sure your healthcare providers know all the medications, vitamins, and supplements you are taking.
- Keep contact information for your doctors and pharmacy on hand to facilitate communication across clinics and hospitals.

### **Pain Relief Medications**

### Short-Term (Acute) Pain

- ▼ Mild to moderate pain can often be managed without medication or with creams or gels, acetaminophen, or NSAIDs\*. The right dose and timing improves these effects.
- ➤ Buprenorphine or methadone prescribed for OUD may also be used for moderate to severe pain by temporarily adjusting the dose as approved by a prescriber.
  - Naltrexone does not treat acute pain.
- Severe acute pain may require other prescription opioids for a short time.
  - Prescribers commonly continue buprenorphine or methadone for OUD during treatment of acute pain.
  - Prescribers will closely monitor all opioid use to ensure safety.

### Long-Term (Chronic) Pain

- Buprenorphine and methadone can be used to treat both pain and OUD.
   A pain management specialist should be consulted.
- Medication alone is unlikely to fully treat chronic pain. Effective chronic pain management plans include non-medication therapies and treatment of underlying causes.
- ➤ Long-term medications, including antidepressants and NSAIDs\*, may help with some types of chronic pain.

\*See back panel for medication details.

### **Non-Medication Pain Relief**

### Short-Term (Acute) Pain

- ▼ Ice, heat, rest, and changing positions are simple steps that can relieve pain.
- Relaxation techniques like music, meditation, mindfulness, and aromatherapy may help.
- ➤ Positive distraction like socializing with friends or rewarding activities can refocus the mind away from pain.
- ➤ Early physical therapy may prevent acute pain from becoming chronic.

### Long-Term (Chronic) Pain

- ▼ Goals of treatment include reduced intensity of pain, improved physical function, and ability to perform daily activities.
- Physical therapy or exercise may help improve strength and reduce pain.
- Mind-body activities, like acupuncture, yoga, and tai chi, may help with coping and function.
- Mental health tools like mindfulness, counseling, and peer groups are useful for coping with chronic pain.

# Facts about Pain and Opioid Use Disorder (OUD)

- OUD changes how the brain experiences and responds to physical pain, including lowering pain tolerance.
- OUD affects pain treatment. Some medications used to treat OUD also help with pain.
- Health care providers may have little experience or feel uncomfortable treating pain and OUD together.
- Total
  pain relief
  is not always
  possible, but there
  are ways to reduce
  suffering and help
  with coping.
- No one deserves unbearable pain, and pain *can* be managed without compromising OUD treatment, remission, and recovery.

### **Medications for OUD**

**Buprenorphine** = Suboxone, Zubsolv, Sublocade, and others

May also be used in pain treatment

**Methadone** = Methadose Oral tablets may also be used in pain treatment

**Naltrexone** = Vivitrol, ReVia

Caution: Naltrexone used for OUD blocks the effects of opioid pain relievers

### Common Non-Opioid Pain Relievers

| Class                          | Generic   | Brand                                     |
|--------------------------------|---|---|
| Acetaminophen                  |   | Tylenol                                   |
| NSAID                          | ibuprofen<br>naproxen<br>ketorolac<br>others      | Advil, Motrin<br>Aleve<br>Toradol         |
| Anti-<br>depressant            | duloxetine<br>venlafaxine<br>fluoxetine<br>others | Cymbalta<br>Effexor<br>Prozac             |
| Cream,<br>gel, patch<br>or rub | lidocaine<br>capsaicin<br>menthol<br>others       | Many brands;<br>check product<br>packages |

## NIH HEAL INITIATIVE

**HEALing Communities Study Kentucky** 

This document is intended to help patients engage with healthcare teams. The information herein does not constitute medical advice and should not replace the clinical decision making of licensed providers. For more information, contact monica.roberts@uky.edu.

# Pain Relief for Patients with Opioid Use Disorder



Education and
Practical Advice for
Patients or Caregivers