

Pharmacy Highlights

Pain Management

According to the CDC, nonopioid therapies are at least as effective as opioids for many common types of acute pain. Common types of acute pain include lower back pain, injuries such as sprains/tendonitis, minor postoperative pain, dental pain, headache/migraines, kidney stone pain. Nonopioids used for acute pain include acetaminophen, topical or oral non-steroidal anti-inflammatory drugs (NSAIDs), musculoskeletal agents, topical capsaicin, and lidocaine patches. Opioids should be used at the lowest most effective dose for the shortest expected duration of pain. Examples of opioids include morphine, hydrocodone, oxycodone, and fentanyl.

Nonpharmacological treatments such as heat or cold, massage, exercise, acupuncture, spinal manipulation, transcutaneous electrical nerve stimulation (TENS), and remote electrical neuromodulation can also be effective for acute pain.

Nonopioid therapies are preferred for subacute and chronic pain. Nonopioid therapies include antidepressants and antiseizure medications. Nonpharmacological treatments for chronic pain are exercise therapy, physical therapy, psychological therapy, aquatic therapy, weight loss, acupuncture, spinal manipulation, yoga, tai chi, low-level laser therapy, massage, mindfulness-based stress reduction, multidisciplinary rehabilitation.

Pain management in patients 65 years of age and older

Adults 65 years of age and older have an increased risk of opioid and nonopioid side effects. Risks versus benefits and pain goals should be discussed when discussing treatment options.

Considerations in older adults:

- Drug-drug interactions
- Cognitive impairment
- Fall Risk
- Use, dose, and duration of medications especially NSAIDs, TCAs, opioids, anti-seizure agents
- Use of the lowest effective dose
- Use of shortest duration of therapy