

IMPORTANT NOTICE REGARDING OPIOID PAIN MEDICATION

Dear APSSC Patient,

As you may be increasingly aware through the media, important changes are continuing regarding the use of opioid pain medications for chronic pain. These medications include but are not limited to Hydrocodone (Vicodin, Norco), Codeine (Tylenol #3), Oxycodone (Percocet, OxyContin), Dilaudid, Morphine (MS Contin, MS IR), Fentanyl Patch, Tapentadol (Nucynta), Oxymorphone (Opana), and Methadone.

Federal and State guidelines must be followed by all doctors when prescribing these medications. This includes mandatory monitoring and attempts to reduce/discontinue opioid usage when possible, even in those patients who have been taking these medications for many years.

Current research shows that for many patients taking high doses of opioids, their body's pain receptors simply 'reset' and adapt to the higher pain medication amounts. This in turn can cause the body to be more sensitive to pain, and a vicious cycle ensues. A very slow weaning (reduction) over time can allow the body to 'reset' without causing withdrawal side effects or any significant increases in pain.

Some governmental agencies are proposing limiting opioid prescriptions to 1 week at a time for use primarily after surgery, a major injury/ illness requiring hospitalization or for cancer pain. While we disagree with such draconian measures, it shows the seriousness that legislators see as a larger problem of an opioid addiction epidemic.

If you are taking the above medications, your provider may be discussing with you how the above medications are helping you function with activities of daily living and possible treatment goals for reducing or eliminating opioid usage.

If you believe that you have become dependent or addicted to opioid pain medications, please inform your provider so that we can help.

Thank you for your understanding.

APSSC