

## Which Opioids Are Best?

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## Which Are the Best Opioids for Chronic Pain? Long vs. Short-Acting Opioids

Opioid drugs are special prescription drugs recommended for pain relief. These drugs are used for pain associated with cancer or other conditions when the pain is moderate to severe. They reduce the intensity of the pain signals reaching the brain. A variety of opioids are available on the market, and they can be classified in two broad groups: long acting and short acting opioids. The doctor will consider the risks versus benefits of a drug before recommending it for chronic pain. In many cases, he can advise to take long acting drugs on a regular basis while short-acting opioids are used as needed, as a rescue medication (i.e., if the pain is very intense). Let's look at the advantages and disadvantages of these two major groups of opioid drugs.

## Long-Acting vs. Short Acting Opioids

As the name implies, the effects of these drugs will last longer compared with short acting drugs. It may be easier for you to take them, since you will need lower doses and take them less frequently for pain management. They provide a more consistent and stable analgesia (pain relief) because their concentration in blood remains consistent for a longer period of time. The risk of side effects such as sleep problems, nausea, itchiness and constipation is lower compared with short-acting drugs. Finally, they are less likely to be abused because they are not often linked with euphoria (elevated mood) and addiction as short acting opioids are.

Although doctors recommend more long acting opioids in recent years, there are some concerns regarding them. A major one is that their effects may not last as long as it says in the books. In real life, some drugs like MS-Contin (that's supposed to provide pain relief for 12 hours) may not be efficient for more than 8 hours. Similar problems had been recorded in clinical practice with Oxycodone ER (Oxycontin), methadone and levorphanol, suggests Dr. Charles Argoff, MD, in an article published in Medscape.

On the other hand, short acting opioids are mostly recommended for acute, transient types of pain that don't need long lasting analgesia. Examples of short acting opioids include immediate-release (IR) morphine, codeine, fentanyl, hydrocodone, and oxycodone. Some of them are combined with acetaminophen (Tylenol) or other non-steroidal, anti-inflammatory drugs (NSAIDs) and can't be used in high doses (as NSAIDs can be toxic for the liver and digestive system). Short-acting opioids are not as potent as the long acting drugs either.

## **Conclusions**

This is a grey area of medicine, and the prescription of either long or short acting opioids will vary from case to case. According to an extensive review of scientific literature (2009), the researchers were not able to draw a clear conclusion about which opioids are the best. The American Pain Society and American Academy of Pain Medicine recommends the following guidelines: there is not enough evidence supporting the fact that long acting opioids work better than the short acting ones in chronic pain not related to cancer; the treatment should be tailored based on the patient's health status, previous treatment with opioids, therapeutic goals and possible side effects.