



ST VINCENT'S
HEALTH AUSTRALIA



Opioids in Addiction and Pain and how to differentiate between the two

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UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES

Common scenarios



Pain consequent to trauma in a previously opioid dependent person

Pain occurring in an opioid addicted person

Long-term use of opioids resulting in opioid dependence

Chronic pain and opioid use
permit “rejection”



Pain in an addicted person

A patient who is opioid dependent

heroin

opiates

A patient who is on methadone

low-high dose

A patient who is prescribed buprenorphine

sublingual

long-acting depot

A patient who is taking naltrexone/has a naltrexone implant

Long-term use of opioids resulting in opioid dependence



Patient on opioids for chronic non-malignant pain

- patient experiences trauma and requires additional pain management
- patient on high dose opioids considered to be inappropriate
- patient on high dose opioids considered to be experiencing opiate induced hyperalgesia
- how to identify warning signs
- how to set about weaning dose
- developing a management plan
- legal/paperwork



Pain consequent to trauma in a previously opioid dependent person

Patient presents following minor injury

Patient presents following more severe injury

Basic considerations

- nature of injury and likely consequence
- “what would I do if patient was not opioid dependent?”
- consider patient concerns- some patients do NOT want opioids
- use of opioid-sparing medications/approaches
- which opioid to use if necessary

Chronic pain and opioid use permit “rejection”/other catastrophe



Usually present in crisis!

Understanding of legislative and permit requirements

Immediate action

What to check- prescription shopping service, DPRG, previous prescribers

Definitive action

How to obtain a second opinion

