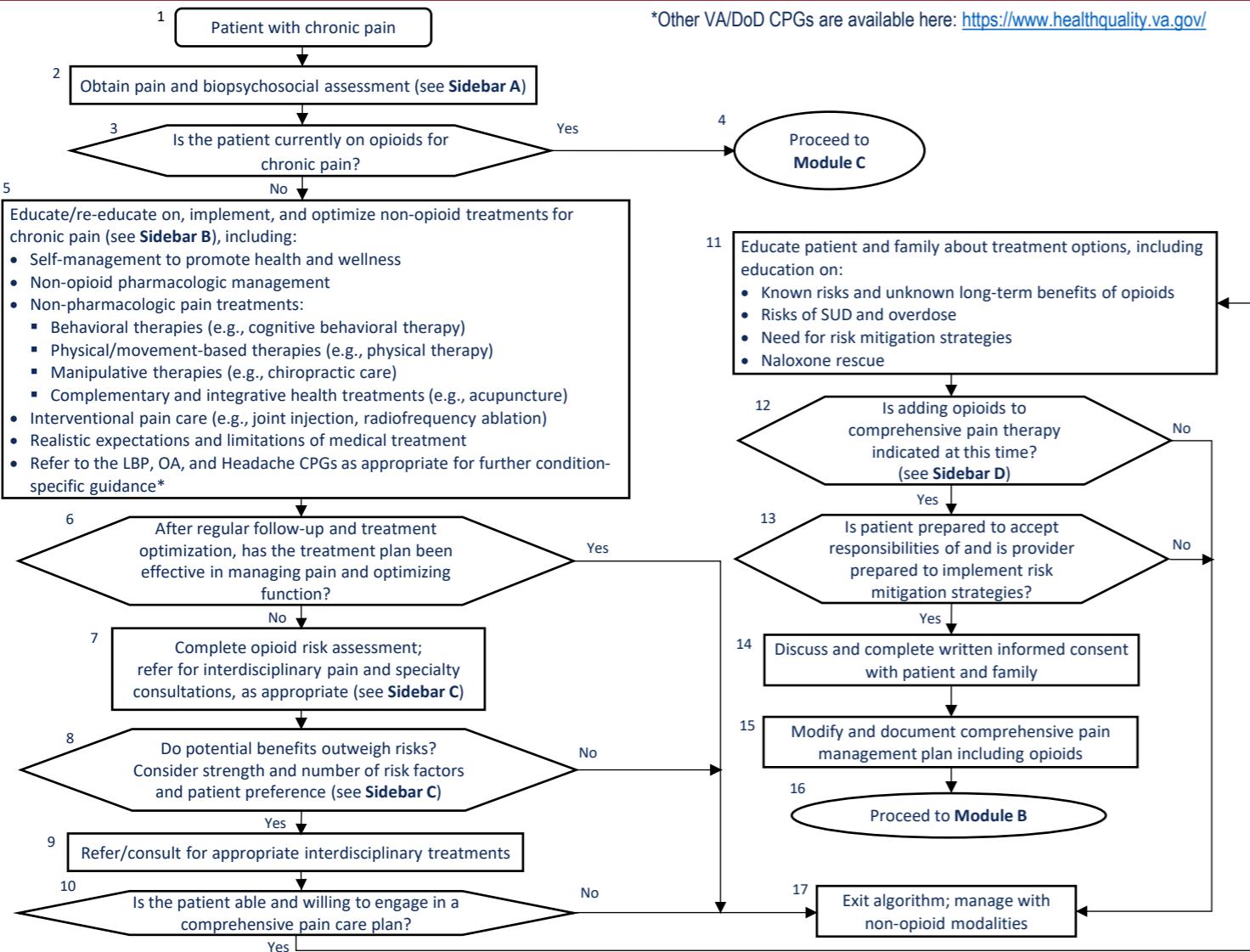


The Use of Opioids in the Management of Chronic Pain



Module A: Determination of Appropriateness for Opioids for Chronic Pain

*Other VA/DoD CPGs are available here: <https://www.healthquality.va.gov/>



Sidebar A: Components of Pain/Biopsychosocial Assessment

- Conduct a pain assessment (e.g., information about the onset of pain, location, duration, exacerbating factors, relieving factors, whether there is radiation [location of the radiation and what triggers the radiation], 24 hour pain pattern, quality of pain)
- Assess history of previous treatments and effect on pain
- Assess impact of pain on daily functioning and quality of life (e.g., pain interference, family, education, work, community, social activities, sleep quality)
- Assess patient's functional goals
- Evaluate psychological/behavioral factors, including suicide risk, a that may affect treatment (e.g., pain avoidance, pain catastrophizing)
- Evaluate social factors that may affect treatment (e.g., employment, homelessness)
- Assess current and past co-occurring conditions (medical and behavioral health comorbidities)
- Conduct physical exam
- Confirm diagnosis (review previous diagnostic studies)
- Consider consultations and referrals
- Patient beliefs and understanding of:
 - ◆ Their treatment preferences
 - ◆ The perceived efficacy of various treatment options

For patients already on prescribed opioids, see **Module C**.

^a See the VA/DoD CPG for the Assessment and Management of Patients at Risk for Suicide, available at: <https://www.healthquality.va.gov/>

Sidebar B: Non-opioid Treatments for Chronic Pain

- Rehabilitation and manipulative therapies (e.g., provided by physical therapists, occupational therapists, chiropractors)
- Pharmacologic therapy (e.g., over-the-counter medications, non-opioid prescription pain medications)
- Interventional procedures (e.g., trigger point injections, joint injections, acupuncture)
- Psychological and behavioral interventions (e.g., motivational interviewing, CBT)
- Complementary and integrative treatments (e.g., yoga, tai chi)

Sidebar F: Considerations for Tapering, Dosage Reduction, and Discontinuation

- Patient preference
- Patient characteristics and needs
- Lack of clinically meaningful improvement in functional goals (review treatment goals at onset of treatment)
- Concomitant use of medications that increase risk of overdose
- Co-occurring medical or behavioral health conditions, including SUD, that increase risk
- Patient non-compliance with opioid safety measures and opioid risk mitigation strategies
- Patient non-participation in a comprehensive pain care plan
- Higher dosage which increases risk of adverse events (see **Sidebar L**)
- Pain condition not effectively treated with opioids (e.g., back pain with normal MRI; fibromyalgia)
- Improvement in the underlying pain condition being treated
- Significant side effects
- Experiences overdose or other serious adverse events
- Diversion

Abbreviations: CBT: cognitive behavioral therapy; CPGs: VA/DoD Clinical Practice Guidelines; LBP: low back pain; MAT: medication assisted treatment; MEDD: morphine equivalent daily dose; mg: milligram(s); MOUD: medication for opioid use disorder; MRI: magnetic resonance imaging; OA: osteoarthritis; OEND: Overdose Education and Naloxone Distribution; OUD: opioid use disorder; PDMP: Prescription Drug Monitoring Program; SUD: substance use disorders; UDT: urine drug testing; VA/DoD SUD CPG: VA/DoD Clinical Practice Guideline for the Management of Substance Use Disorders

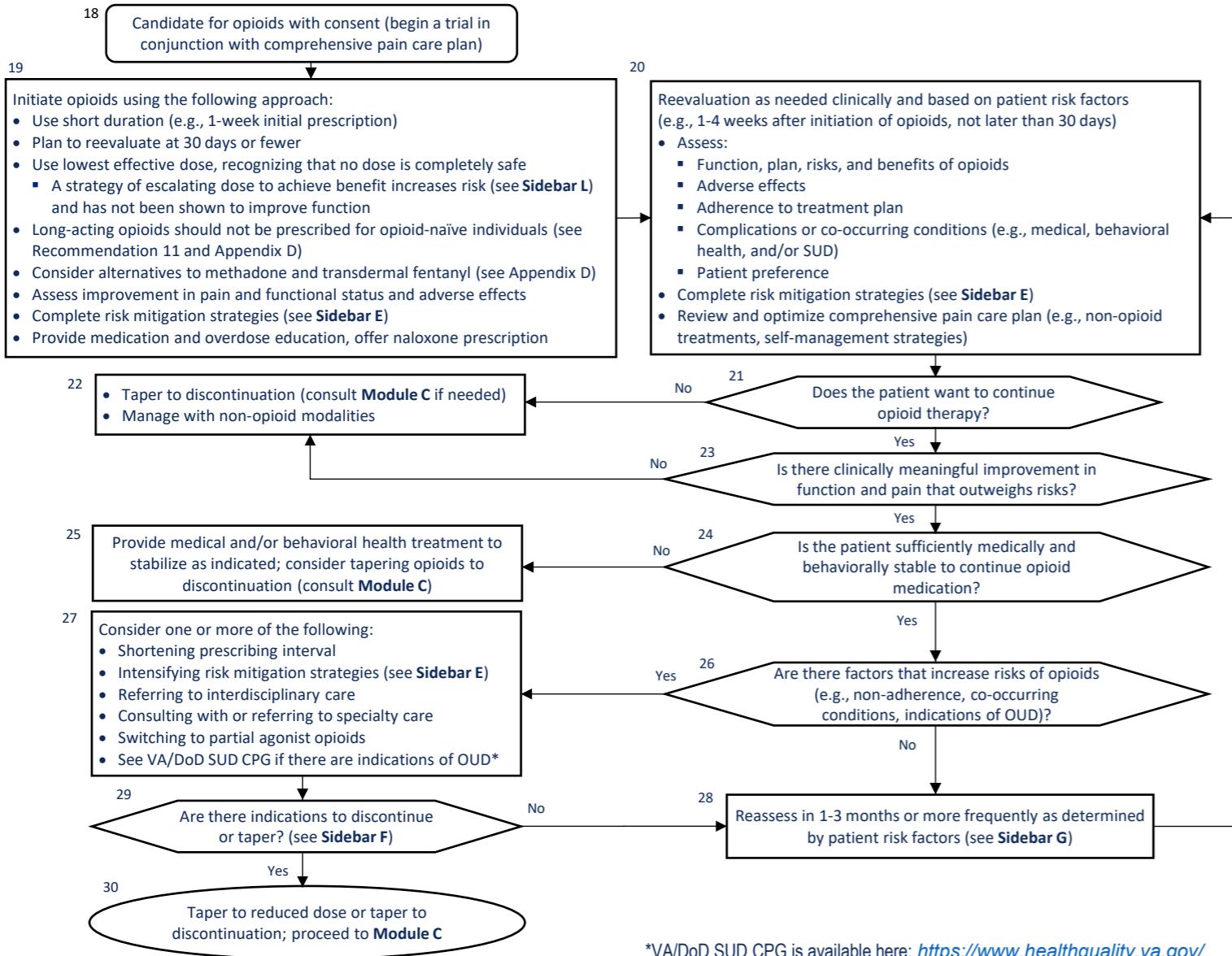
Additional Sidebars referenced throughout the algorithm can be found in the full guideline (on pages 28-32).

Access to the full guideline and additional resources are available at: <https://www.healthquality.va.gov/>

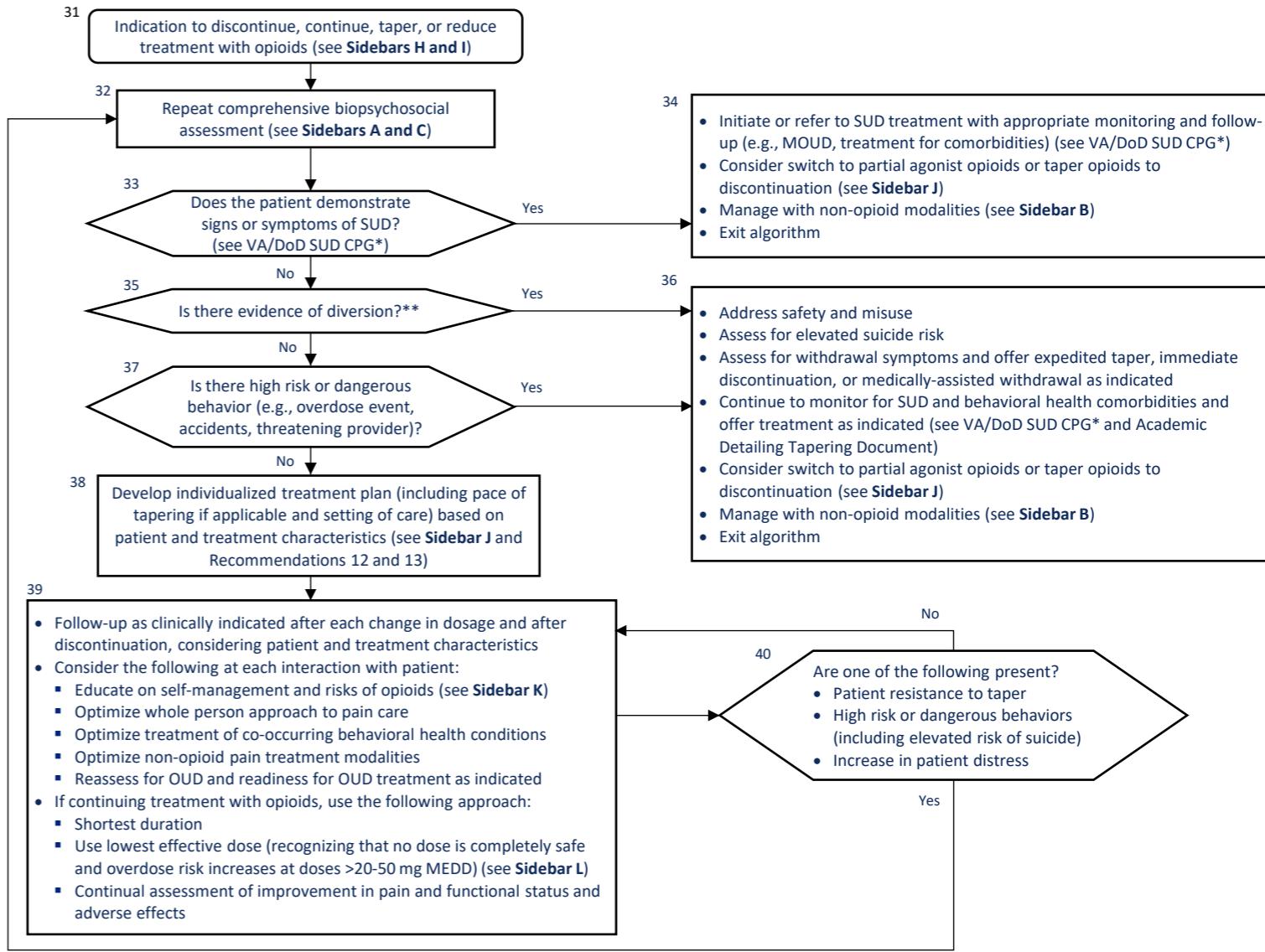


Module B: Initiation of Treatment with Opioids

Module C: Maintaining, Tapering, Discontinuing, or Switching from Full Agonist Opioids



*VA/DoD SUD CPG is available here: <https://www.healthquality.va.gov/>



**According to the CDC, drug diversion is when prescription medicines are obtained or used illegally.