

# How to talk with your patients about **OPIOIDS**



Discussing pain medication with your patients is important. Patients may need repetition and conversations may take time. Talking with your patients about opioids helps them understand the benefits and risks of the medication and supports your treatment by improving your patients' safety.

## Conversation Starters for Initial Opioid Prescription

**“I WANT TO MAKE SURE YOU UNDERSTAND WHAT MEDICATION I AM PRESCRIBING YOU.”**

Opioids reduce pain; they do not treat the cause of your pain. There are other choices that might help your pain just as well.

**You may not be free of pain. Some discomfort is OK because pain is our body's way to tell us how we are healing.** Listen to your body as you heal and rest. And remember, healing does not happen right away.

**“LETS TALK ABOUT YOUR GOALS DURING THIS TREATMENT PROCESS.”**

As you are healing, what do you need be able to do (such as for work, with your family, or around the house)? What are some of the things you would like to be able to do? The plan is to reduce your pain and add activity back into your life.

**“A FEW COMMON SIDE EFFECTS INCLUDE:”**

- |                                 |              |              |
|---------------------------------|--------------|--------------|
| • Increased sensitivity to pain | • Dry mouth  | • Depression |
| • Constipation                  | • Sleepiness | • Itchiness  |
| • Nausea and vomiting           | • Confusion  | • Dizziness  |

**“HERE'S WHAT YOU CAN DO TO REDUCE THE RISKS OR INTENSITY OF SIDE EFFECTS.”**

1. Never take opioids in higher amounts or more often than prescribed.
2. When you start taking opioids, they might affect your ability to safely operate a vehicle—proceed with caution until you know how they affect you.
3. To prevent constipation with opioid use, drink more fluids and eat more fiber than usual, and maintain or increase physical activity. You might need stool softeners or laxatives.

**“OTHER MEDICATIONS OR ALCOHOL CAN MAKE THE SIDE EFFECTS OF AN OPIOID WORSE AND CAN EVEN BE DANGEROUS.”**

Do not drink alcohol while taking this medication. If you talk to a pharmacist or another doctor, make sure they are aware that you are on this medication. The combination of opioids and benzodiazepines (like Xanax and Ativan) may cause you to stop breathing and cause you to overdose.



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**“YOUR TREATMENT PLAN INCLUDES...”**

...how long you'll be taking opioids, how to manage breakthrough pain, and if you need physical therapy. Let's also set a plan for follow-up.

**“OPIOIDS CAN BE HABIT FORMING AND PUT YOU AT RISK OF ADDICTION.”**

Addiction can be characterized by cravings and sometimes a loss of a sense of control. If you feel like this at any time, I'm here. Please reach out to me.

**“ANYONE WHO TAKES OPIOIDS REGULARLY FOR MORE THAN A FEW DAYS CAN BECOME PHYSICALLY DEPENDENT ON THE MEDICATION.”**

This is not the same as addiction, but it simply means that when you stop taking the medication, you are likely to experience withdrawal effects, which include nausea, vomiting, and diarrhea, and you may feel restless and agitated because your body is in withdrawal.

**“IF YOU HAVE YOUNG CHILDREN OR TEENS IN YOUR HOME, YOU NEED TO KEEP THIS MEDICINE SECURE.”**

Do you have a place that can be locked to keep this medicine?

**“IF YOU HAVE ANY LEFTOVER OPIOID MEDICATION, DISPOSE OF IT SAFELY.”**

Do not share your opioid medication or save it “just in case.” If you start to experience pain again or a different kind of pain, please give me a call/schedule an appointment. Taking these medications again, after not taking them for a while, increases your risk of not catching your breath.

**“I'M ALSO WRITING A PRESCRIPTION FOR NALOXONE.”**

This opioid medicine can help you, but it also has some bad side effects. It can make your breathing slow down or even stop. If this happens, Naloxone will help you start breathing again. Because there will be opioid medicines in your house, let's keep you and your family as safe and healthy as possible. Just in case, get Naloxone.

**“WE COVERED A LOT TODAY, I WANT TO MAKE SURE I WAS CLEAR ABOUT YOUR PRESCRIPTION AND RISKS, CAN YOU TELL ME HOW YOU ARE GOING TO TAKE YOUR NEW PRESCRIPTIONS?”**

I want to confirm you understand what the medication is for and how to use it.

**SBIRT (Screening, Brief Intervention, and Referral to Treatment)** is an evidence-based, comprehensive, and integrated public health approach to the delivery of early intervention and treatment services to patients who have risky alcohol or drug use.

Please visit <https://bha.health.maryland.gov/Pages/SBIRT.aspx> for more information.

## Other Helpful Tips

**Limit content:** Prioritize what needs to be discussed and limit information to 3-5 key points.

**Repeat key points:** Be specific and concrete in your conversation and repeat key points.

**Patient participation:** Encourage patients to ask questions and be involved in the conversation during visits and to be proactive in their health care.

**Teach back:** Confirm patients understand what they need to know and do by asking them to teach back directions.

