

Ethical Aspects of Chronic Pain Management with Opioid Analgesics

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Pain has been identified as the most common reason that patients seek medical attention. It is estimated that nonmalignant chronic pain affects more than 50 million Americans. The World Health Organization has identified [pain](#) as a leading health problem in the country (Payne et al., 2010). Repeated studies have identified difficulty on the part of providers to manage pain to meet patient needs. Many patients with severe pain change health care providers at least once in the search of adequate pain relief (Casey, 2011).

[Opioid](#) analgesics, including oxycodone, hydrocodone, codeine, [morphine](#), and fentanyl, are among the most effective drugs for managing many types of pain. These drugs block the perception of pain by binding to opioid receptors in the brain, spinal cord, and gastrointestinal tract (Cohen, 2011). Data supports opioid therapy as an effective initial and intermediate treatment for chronic pain, and evidence suggests the usefulness of opioid analgesics in treating chronic pain over the long term (Payne et al., 2010).

Although their effectiveness in treating chronic pain is well supported, opioid analgesics are associated with a number of serious risks. Nausea, disorientation, respiratory depression, constipation, and decreased sex drive are among the possible side effects of use (Payne et al., 2010). Patients' fears of side effects, ineffective communication between provider and patient, concerns regarding potential for abuse, and socioeconomic factors are significant barriers to effective treatment of chronic pain with opioid therapy (Fudin, 2011).

Diversion and misuse of prescription opioid analgesics is also significant problem. Close to se...

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