

## **BACKGROUNDER - Canadian Guideline for Safe and Effective Use of Opioids for Chronic Non-Cancer Pain**

### **Chronic non-cancer pain is a growing concern for Canadians**

Chronic non-cancer pain (CNCP) is classified as chronic pain not associated with cancer that exists for more than six months. It is a symptom of many conditions including arthritis, spinal disc herniation, stroke and trauma, with low back pain being the most common form. CNCP is associated with the increased use of health services, and is the most common cause of long-term disability.

Opioids have been proven effective in reducing the intensity of pain for many chronic pain conditions.

### **Addressing pain management needs of an aging population.**

As Canada's population ages, the number of patients with CNCP is expected to increase significantly. At present, approximately 38 per cent of institutionalized senior citizens and 27 per cent of senior citizens living in households suffer from CNCP.

### **Historical concerns have limited the prescribing of opioids**

Many physicians have been reluctant to prescribe opioids for CNCP because clear, consistent guidance has been lacking. Other reasons have included fear of scrutiny by medical regulatory bodies, limited knowledge of the specifics of prescribing opioids for non-cancer pain and difficulty selecting appropriate patients. Effective implementation of the new guideline is expected to address many of these issues.

Mis-prescribing of opioids has also been an issue. This includes situations in which patients have received opioids inappropriately because of a physician's limited knowledge, or cases where physicians have prescribed opioids in response to pressure from patients.

### **Giving physicians timely and reliable guidance on responsible opioid prescribing**

The new Canadian guideline was developed in response to requests from physicians for clear, evidence-based guidance regarding the use of opioids to safely manage patients with chronic non-cancer pain.

Some treatment information and guidelines were found to be of limited value to physicians because they were too broad or outdated or focused on problems other than CNCP. Although some Canadian medical regulatory authorities have had CNCP/opioid use guidelines in place for some time, the new guideline represents a national resource for all to consider.

**Guideline based on evidence and extensive consultation**

Several groups were involved in the research, drafting, reviewing and approval of the new guideline. These included a research team of academic experts and a national advisory panel consisting of 49 experts and laypeople from across Canada. This latter group included pain specialists, family physicians, addiction experts, pharmacists, academics, nurses, and patient group representatives.

The National Opioid Use Guideline Group (NOUGG) coordinated the development and implementation of the guideline and was responsible for the guideline's final approval. NOUGG consists of representatives from Canadian medical regulatory authorities and the Federation of Medical Regulatory Authorities of Canada (FMRAC).

**New guideline and other efforts also aimed at reducing opioid addiction and abuse**

Opioids are an essential part of the modern arsenal for treating pain, including CNCP.

Unfortunately, these powerful drugs can present the risk of addiction and abuse when prescribed or distributed improperly. In fact, recent research suggests that prescription opioid abuse has outstripped street drug abuse in Canada.

The new guideline will complement other approaches to facilitate legitimate use of opioids while addressing potential abuse. These include better public education and addiction treatment, sophisticated computer monitoring of opioid prescriptions, tamper-resistant prescriptions, and treatment contracts between physicians and patients.