

IASP Statement on Opioids

<https://www.iasp-pain.org/Advocacy/OpioidPositionStatement>

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Opioids are indispensable for the treatment of severe short-lived pain during acute painful events and at the end of life (e.g., pain associated with cancer). Currently, no other oral medication offers immediate and effective relief of severe pain. Although opioids can be highly addictive, opioid addiction rarely emerges when opioids are used for short-term treatment of pain, except among a few highly susceptible individuals. For these reasons, IASP supports the use and availability of opioids at all ages for the relief of severe pain during short-lived painful events and at the end of life. IASP's 2010 [Declaration of Montreal](#) states that access to pain management is a fundamental human right. In some cases, there is no substitute for opioids in achieving satisfactory pain relief.

Despite this stated value of opioids, the role of opioids in the treatment of chronic pain has come into question. Recent open-ended and indiscriminate long-term prescribing of opioids in the United States and Canada has led to high rates of prescription opioid abuse, unacceptable death rates, and an enormous burden to the affected societies. This burden has been a consequence largely of opioid prescribing for the treatment of chronic pain, where long-term effectiveness is uncertain and where harms, especially for high doses, are clear and strongly supported by cautionary data from the affected countries. Such harms include, but are not limited to, addiction and death. Increased prescribing for chronic pain is occurring in some other developed nations, while the developing world continues to struggle with lack of opioid availability for appropriate indications.

IASP strongly advocates for access to opioids for the humane treatment of severe short-lived pain, using reasonable precautions to avoid misuse, diversion, and other adverse outcomes. At the same time, IASP recommends caution when prescribing opioids for chronic pain. There may be a role for medium-term, low-dose opioid therapy in carefully selected patients with chronic pain who can be managed in a monitored setting. However, with continuous longer-term use, tolerance, dependence, and other neuroadaptations compromise both efficacy and safety. Chronic pain treatment strategies that focus on improving the quality of life, especially those integrating behavioral and physical treatments, are preferred. IASP also strongly advocates for continued research to identify ways to minimize opioid risk and find effective alternatives to opioids for the treatment of various pain problems.

Notes

1. This statement is based on best available evidence and expert opinion. See References below.

2. IASP recommends adherence to and promotion of local opioid prescribing guidelines, with special attention to assessing the supportive evidence with appropriate scientific rigor.
3. IASP recognizes the importance of comprehensive educational efforts to teach safe and appropriate opioid use.

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