

Media release

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Medical experts seek consensus on opioid prescribing

Medical experts with a broad range of experience in the use of opioids for pain relief will seek a consensus view on the prescribing of opioids at a meeting today.

As problems emerge with unsanctioned use of opioid analgesics, key medical stakeholders will aim to agree upon effective guidelines for the prescribing of opioids.

Former dean of the Faculty of Pain Medicine (FPM) of the Australian and New Zealand College of Anaesthetists, Dr David Jones, says there is a role for opioids in the management of pain, when done under the supervision of a properly qualified and educated medical practitioner.

"Some people with long-term chronic pain benefit from opioids as part of a properly devised and monitored pain management plan," Dr Jones said.

"The Faculty of Pain Medicine has publicly-available principles for the prescribing of opioid analgesics for patients with chronic non-cancer pain, which can assist doctors in the responsible prescribing and use of opioids."

The principles include:

- A comprehensive assessment of the patient, including assessment of risk.
- Adequate trial of other therapies.
- Agreement regarding an opioid trial.
- Conduct of an opioid trial.
- Response to difficulty in achieving goals of an opiod trial.

The FPM principles require doctors and patients to discuss the goals of an opioid trial, including an agreement that if the goals are not met, the trial will be discontinued. There should only be one prescriber of opioids, ideally only one pharmacy to dispense the opioids, no early repeats, no loss replacements, and an option for random urine monitoring where appropriate.

"Opioids should not be used as a first line treatment for aches and pains," Dr Jones said. "They should be considered only for severe pain with a fair attempt made to define an identified cause, when other reasonable measures have failed, and only after careful assessment of the patient.

"Most importantly, any pain management plan involving opioids must include an exit strategy for withdrawal."

The meeting involves members of the Victorian Department of Health, the Victorian Medical Board, the Australian Medical Association, the Royal Australian College of

General Practitioners, the Royal Australian and New Zealand Colllege of Psychiatrists, pain medicine specialists, addiction medicine specialists and rehabilitation specialists.

Any consensus reached at the meeting will be presented to the Victorian Department of Health for consideration for further policy development and communicated widely within the medical profession.

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