



Media release

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Are opioid prescriptions making pain worse for the elderly?

The rapid escalation of opioid use in the elderly over the last 10 years – compared with opioid use in other age groups – should be a matter of concern to all health practitioners, according to a leading anaesthetist and pain medicine specialist.

The elderly are at risk of worsening health by being prescribed opioids, as this class of medication can lead to an increase in the symptoms of their chronic non-cancer pain warned Dr Tim Semple, a Fellow of the Faculty of Pain Medicine of the Australian and New Zealand College of Anaesthetists (ANZCA) and a specialist anaesthetist at the Royal Adelaide Hospital.

Writing in the newly released latest edition of *Australasian Anaesthesia*, published every two years by ANZCA, Dr Semple writes that the community of older patients who suffer from chronic pain often live with a variety of health conditions, the management of which can involve taking other medications, known as “poly-pharmacy”.

This is sometimes due, in part, to the over-prescription of opioids for use in chronic non-cancer pain. Using strong opioid medicines in chronic pain became popular about 20 years ago and there were high expectations for sustained benefits, Dr Semple said.

“Over time it has been established that opioids carry far greater risks and fewer benefits than was initially believed.

“An elderly patient’s long-term codeine intake prior to the prescription of fentanyl (another strong-dose opioid) may have been a significant contributor to inducing opioid tolerance and possibly opioid-induced pain sensitivity,” Dr Semple writes.

This is exacerbated by the fact that some clinicians “appear to be unaware of current thinking and practice” in regard to opioid “ceiling dose” – the maximum dose and duration of prescriptions recommended for chronic non-cancer pain.

“This manifests as failure to recognise when prescribing is heading toward the high dose, and high-risk range,” he said. Dr Semple said he wanted to encourage the understanding and expectation that opioids – if used at all – should be prescribed for medium-term use only, rather than “lifelong dosing” and that they were often not an effective choice for the management of pain in the elderly.

Australasian Anaesthesia 2015, known colloquially as the “Blue Book” contains articles from authors from Australia and New Zealand. The publication can be accessed [here](#).

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