



# OPIOID USE IN OLDER ADULTS

## A Guide for Providers

In 2016, the Pennsylvania Department of Health and Pennsylvania Medical Society published prescribing guidelines for opioid use and safe prescribing in geriatric pain.<sup>2</sup> It was created with a focus on considerations for opioid treatment in older adults with chronic, non-cancer pain.<sup>2</sup> A summary of 10 key points follows:

1. Consider non-pharmacologic therapies first.
2. Starting therapy for chronic pain with long-acting opioids should be avoided.
3. Low-dose, as needed opioid therapy may be a reasonable treatment option for some patients
4. Recommend caregivers help patients to use pill box organizers and for as-needed medications, writing down when meds were taken, especially for older adults with cognitive impairment.
5. Start low and go slow. Initiate therapy at 25% to 50% of the usual adult dose and titrate slowly.
6. When initiating opioid therapy, start a regimen for opioid-induced constipation.
7. Adverse effects are common in the population and include bone loss and increased fracture risk, impaired balance, urinary retention, somnolence, sleep disordered breathing, dizziness, hypogonadism, and erectile dysfunction.
8. Only continue therapy with opioids when there is a clear benefit to the patient.
9. Regardless of age, monitor for drug abuse. Use an opioid misuse assessment or interview with all patients.
10. Assess patient for alcohol use as well as use of any other medication with respiratory depressive effects.

The World Health Organization's three-step ladder can also be applied to pain treatment in older adults:

**Step 1:**  
Nonopioid analgesic  
(acetaminophen preferred; avoid  
NSAID use in this population)  
+/- adjuvant agent

**Step 2:**  
Weak opioid  
+/- a nonopioid analgesic  
+/- adjuvant agent

**Step 3:**  
Strong opioid  
+/- a nonopioid analgesic  
+/- adjuvant agent

*Opioids do have a proper place in the treatment of pain. Especially in older patients, adverse effects must be closely monitored by patients, caregivers, and providers.*

Opioids for persistent pain in older adults. <https://www.mdedge.com/ccjm/article/109137/geriatrics/opioids-persistent-pain-older-adults>  
Geriatric Pain Prescribing Guidelines for Pennsylvania. <https://www.health.pa.gov/topics/Documents/Opioids/OpioidGuidelinesGeriatrics.pdf>  
CDC Opioid Guidelines for Prescribing Opioids in Chronic Pain. <https://www.cdc.gov/mmwr/volumes/65/rr/pdfs/rr6501e1.pdf>  
National Institute of Health. <https://www.drugabuse.gov/drugs-abuse/opioids>  
Image: Universal Preserv-A-Chem Inc. <https://www.upichem.com/industries/pharmaceutical/>

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under Grant No. U1QHP28743, Geriatric Workforce Enhancement Program, \$2,549,927 with additional support from the John P. Ellbogen Foundation, Excellence Fund for Geriatric Education. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.