

## Opioid Induced Constipation

**NARRATOR:** Many so-called miracles of modern medicine come with side effects that can create discomfort or additional medical challenges. For example, opioid medications treat acute or chronic pain, but they can cause constipation. In a recent survey of 621 people using opioid treatments, the ACPA discovered that almost 50% registered abdominal pain and cramping. Over 50% noticed that they required laxatives or stool softeners to promote more normal bowel movements, and a small number admitted themselves to the ER. Many more reported straining, nausea, incomplete emptying, and hard stools.

**Man (voice-over):** *Opioid treatment helped me live with my pain. But it also made it difficult for me to produce normal stools. I never expected that the constipation would be nearly as painful as the condition I was trying to overcome.*

**Abraham J. Kabazie, MD:**

Almost everyone that starts on opioids and is on opioids for chronic pain for any period of time will develop some sort of constipation.

Opioids cause constipation by interacting with the same receptors that they interact with to reduce pain. So that makes it very difficult to control pain but yet not cause constipation. So these receptors that are in our central nervous system, in the brain and the spinal cord, that are engaged or interlocked with opioids to reduce pain, the same receptors are in our GI track. And the GI track uses something called peristalsis, which is a wave-like formation that starts in the stomach, to the small intestines, to the large intestines, and allows us to have a bowel movement. You can imagine a wave that is interrupted for some reason, and that reason would be opioids, then the stool, the food, backs up in the GI track and results in constipation.

**NARRATOR:** When you're expecting relief from a proven medicine, the last thing you're thinking about is any potential side effects that medicine might cause. That's particularly true when we're talking about opioid prescriptions and the frequent problems they create forming or evacuating waste products from the body. As we've shown, these effects can be both inconvenient and painful, and may in some cases cause people to lose faith in their treatment.

**Woman 1 (voice-over):** *I was miserable. It got so bad that I considered quitting my medication. But then the pain would get worse. I didn't know what to do.*

**NARRATOR:** Opioid induced constipation can be a very confusing illness, only made more so by the lack of information a patient has to analyze or cope with it.

**Woman 2 (voice-over):** *I didn't know what was wrong. I had the same diet I'd always had, but I felt bloated, had abdominal pain, and I had not produced a single normal bowel movement in six days. At*

*one point, it was making it so difficult to sleep that I seriously considered calling an ambulance to take me to the emergency room.*

**Dr. Kabazie:** Over-the-counter stool-softeners are very important and they do work for opioid induced constipation for the most part. People also respond very well to fruit. Prunes ... It's not an old wives' tale – prunes really do work. We tell the patients to try warm prune juice, that does help, too. Salads, fiber, to some extent, works very, very well, too. So that's part of the diet process. So diet does play a role in this and it goes hand in hand with over-the-counter stool-softeners if needed.

**Man (voice-over):** *I knew I was constipated. I tried every laxative and stool-softener on the shelf. Sad to say, things never got better...they just kept getting worse.*

**Dr. Kabazie:** If the constipation that's opioid induced becomes so severe that the patient is not responding to over-the-counter medications, there are some prescription medications that can be used in lieu of over-the-counter medications. There is a very specific medication for opioid-induced constipation. The name is methylnaltrexone but it's an injectable medication, and that is only indicated whenever all else fails.

**Woman 1 (voice-over):** *Overall, I believe my biggest problem was the lack of information. Whatever I thought I knew about opioid induced constipation came from family members and the Internet. That was a lot of information, but there was no way to tell if it was accurate.*

**Dr. Kabazie:** There's nothing more important than communication between patient and physician. First of all, the physician can help ward off constipation by being proactive with the patient, telling the patient that this is more than likely going to be a side effect that they're going to experience, that they can drink plenty of water, because without water, nothing will work. Activity, a short walk, a couple cups of caffeine or coffee or tea, would help as well.

**NARRATOR:**

**At the American Chronic Pain Association, we have tried to lay the foundations for that dialogue with something we call the Opioid Induced Constipation Conversation Guide. This is a visual representation of a person's condition, based on his or her answers to a series of questions about lifestyle, intestinal discomfort, regularity, and personal choices about diet and fluid intake.**

**All that matters, because the more your provider knows about you, the better he or she can assess your condition and plan an effective treatment response.**

**Dr. Kabazie:** I look forward to having someone tell me, "I'm having regular bowel movements, you know, I'm not missing a beat there." People shouldn't be embarrassed to bring up the subject. In fact, they should bring up the subject without type of any reservation or embarrassment. The physician really does want to hear that. It makes the physician feel as though they are doing a service, and they're not

causing more harm than good. So I think an open dialogue in that regard shouldn't be embarrassing for the patient. It's certainly not embarrassing for the physician.

**NARRATOR: The ACPA's Opioid Induced Constipation Conversation Guide can be the start of that discussion with your caregivers. The questionnaire invites you to provide information about the food you eat, your stress level, how much exercise you get, your constipation symptoms, and what remedies you've sought and their dosage levels. In most cases, you get to rate your symptoms and treatments on a scale of one (1) to ten (10), so that your provider and you can be on the same page.**

**Woman 2 (voice-over):** *The Opioid Induced Constipation Conversation Guide was a huge help to me. Just having my symptoms down on paper made it so much easier to start a conversation with my providers.*

**NARRATOR: The Opioid Induced Constipation Conversation Guide is quick and convenient to download from our website: [theacpa.org](http://theacpa.org). It can be the start to a productive conversation with your health care provider or pharmacist, and the start of a more comfortable coexistence with your opioid medications.**