

Speaker 1: If you or someone in your family use an opioid to help manage pain, you know how important it is to treat these medications with the greatest care. The abuse, addiction, and loss of life that are tragically associated with opioids have become a serious crisis. Pharmaceutical companies that make opioid medications now offer versions of these drugs that are more difficult to misuse. They're called abuse-deterrent formulations or ADFs. They're designed to make it harder to crush, cut or dissolve the pills to create a faster high or to allow for other ways of abusing such as snorting or injection, and because ADFs are different, you may have questions or even some misconceptions.

Speaker 1: An ACPA survey of more than 1,000 people with pain about 68% of whom actually use an opioid found that nearly 69% had never heard of abuse-deterrent formulations. You need to make an informed decision about any medication you elect to use including ADFs. So, let's get the facts about them from an expert.

Dr. Ajay Wasan: ADFs are probably best called tamper-resistant medications because if you try to crush them it's very hard to do, but if you manage to crush them into small pieces they still get absorbed at a time-release rate. They still get absorbed slowly in the stomach and the intestines. The time-release technology doesn't make them safer themselves. The advantage of the time-release is that you can get a more steady state of pain relief because you get a steady state of blood level of medication in your bloodstream. The research has shown that patients tend to prefer that. That a more even level of pain relief helps them to do more, and enjoy life more.

Speaker 1: Many folks have misconceptions about ADF prescriptions. Let's take the confusion head-on.

Speaker 3: So this means opioids aren't dangerous anymore, and I can't get addicted, right?

Dr. Ajay Wasan: It is possible to get addicted to abuse-deterrent formulations. It's unusual, but one way is if someone takes an opioid and immediately feel a high. That is one possibility that can lead to addiction. The other possibility is if someone misuses their medications and takes extra medications over and over again. That can also lead to addiction.

Dr. Ajay Wasan: You can overdose on an ADF. If you take more than you're prescribed it is possible that you could overdose and stop breathing. Another possibility is if you have a bad cold or an upper respiratory infection or have some trouble breathing and you take an opioid, that could lead to an accidental overdose.

Speaker 1: Abuse deterrent also doesn't mean you can be any less careful with storage or disposal or any less diligent about never sharing your medications. The ACPA survey showed that only half of the people using opioids store them in a secure location. The rest kept them openly in the bathroom, bedroom or kitchen, or

even in a purse. Don't take a chance on theft or accidental misuse. Lock them up.

Speaker 4: I've taken an opioid medication before, and it really helped. I just don't believe this new ADF prescription's going to do the job.

Dr. Ajay Wasan: The ADFs do work just as well as other opioid medications. They have been tested to show that the same amount of medication gets absorbed in the bloodstream and patients report the same amount of pain relief with the medications. If you're having a problem with your medication, you should go to your doctor and discuss the issue with them and decide together what could be a different approach.

Speaker 5: Abuse deterrent formulation. That means it's probably okay to take more than I'm supposed to.

Speaker 1: Wrong. It's just as dangerous as its always been. Never take more of your pain medication than your doctor has prescribed.

Speaker 3: Now that opioids can't be abused, it's okay to let a friend or family member use them once in a while, isn't it?

Speaker 1: Almost 15% of the people in the ACPA survey thought this may be okay or just didn't know, but sharing these meds with others is dangerous, and can even be fatal. Your opioid prescription is just as strong and it's just as wrong to let someone else have even one pill.

Speaker 4: So suddenly my regular pain med is labeled abuse-deterrent formulation. Does my doctor think I'm abusing my medication or taking too much?

Speaker 1: Not at all. The aim of ADFs is simply to make them less attractive to those who would abuse them.

Dr. Ajay Wasan: My advice to someone who is about to start on an ADF is to understand why an ADF is being prescribed and to understand that it is possible that it might not work the same as your other opioid medications. That's why it's critical to have an ongoing follow-up with your physician and communication regarding the benefits and the possible side effects that could happen.

Speaker 1: Abuse-deterrent formulations can offer an added level of security to help prevent intentional or accidental opioid abuse, but opioids are powerful drugs, and any opioid prescription needs to be treated with caution closely following your prescribers instructions.

Speaker 1: Here's what you need to remember about ADFs. Abuse-deterrent formulations are real opioids and just as strong as non-ADF medication. Never crush, dissolve, or otherwise modify them. It is dangerous. Never take more than directed.

Never share them with others, and always store them securely just like any other opioid. That way you can be sure you are getting the greatest possible benefit at the lowest possible risk to yourself and to others.