



Opioids Provide Only Modest Benefits for Chronic Pain

Researchers say given the many associated downsides and risks, opioids should not be a first choice for chronic noncancer pain.

December 26, 2018 By [Benjamin Ryan](#)

When it comes to treating chronic pain that is not associated with cancer, opioids provide only a nominal benefit over a placebo. And given the many downsides and risks associated with the drugs, researchers say they should not be a first choice for the treatment of such long-term pain, Medscape reports.

Opportunistic infection (OI) raises the risk of both HIV and hepatitis C virus (HCV) if individuals share contaminated needles or other drug paraphernalia when injecting opioid drugs such as heroin.

[Chronic pain is common](#) among people with HIV yet remains under-recognized. One recent [study](#) found that a high proportion of the HIV population is at risk of developing an addiction driven by the use of opioid pills, also known as opioid use disorder (OUD).

Publishing their findings in the Journal of the American Medical Association, researchers conducted a systematic review and meta-analysis of 96 randomized controlled trials comparing opioid treatment with a placebo for the treatment of chronic noncancer pain. The studies included 26,169 participants, 61 percent of whom were female; the group had a median age of 58 years old.

The study authors found that, according to a high-quality of evidence, opioids were associated with improvements in pain and physical functioning. But such benefits were only modest and came with an increased risk of side effects, in particular vomiting.

When comparing opioids with non-opioid pain treatments, including nonsteroidal anti-inflammatory drugs, tricyclic antidepressants and anticonvulsants (anti-seizure drugs), the study authors had to rely on low- to moderate-quality evidence. They found that opioids provided some benefit over such non-opioid treatments when it came to chronic pain.

To read a POZ feature article about chronic pain among people with HIV, [click here](#).

To read the Medscape article, [click here](#) (free registration with the site is required).

To read the study abstract, [click here](#).

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