Medical risks with chronic opioid use

Please read and ask your doctor if you have questions

Opioid overdose affects < 1% of chronic opioid users per year. It causes severely slowed breathing, which you may not notice. Severe cases need to be treated in the hospital. Opioid overdose can cause death.

Breathing problems during sleep affect about 25% of chronic opioid users. Chronic opioid use can cause or worsen sleep apnea. You may not notice breathing problems.

Constipation occurs in at least 40% of chronic opioid users. Use stool-softeners or medicines that stimulate bowel movements. Severe cases of constipation need to be treated in the hospital.

Hypogonadism, impotence, or infertility is a problem in at least 25% of chronic opioid users. Hypogonadism results in low sex hormones, which can worsen sexual function.

Osteoporosis (25% - 75% of chronic opioid users) can cause bone fractures. Regular exercises and exposure to sun can prevent osteoporosis.

Sedation (15% of chronic opioid users) and disruption of sleep (25% of chronic opioid users) can result in day-time sleepiness cause difficulty driving.

Depression, anxiety, or apathy affect about 30 – 40% of chronic opioid users. Depression can worsen pain, just as pain can worsen depression.

Addiction, Misuse & Diversion occurs in 5 – 30%. Misuse or overdose can occur if others - including children and teens- gain access to the opioids.

Dry mouth that may cause tooth decay happens in 25% of chronic opioid users. Brush your teeth and rinse your mouth often. - Chew sugarless gum and drink water or sugar-free, non-carbonated fluids.

Hyperalgesia occurs in about 25% of chronic opioid users. Hyperalgesia means an increased sensitivity. In severe cases, a light touch can feel painful after chronic opioid use.

I have received a copy of the “Medical risks with chronic opioid use”

Patient___________________________________Date________________________