

July 9, 2013

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3851 Rosecrans St # P578
San Diego CA 92110-3115

Dear Wilma,

The most commonly abused prescription medications are opioids, particularly hydrocodone and oxycodone.

"Overdoses involving prescription painkillers are at epidemic levels and now kill more Americans than heroin and cocaine combined." – Thomas Frieden, MD, MPH, Centers for Disease Control and Prevention Director, November 2011

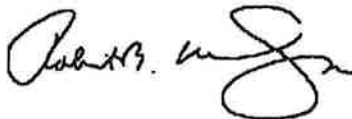
As a family physician, you can play a critical role in protecting patients who need prescription medications to control pain.

The enclosed patient-education brochure is a valuable resource that you can offer patients for whom you prescribe opioid pain relievers. Independently developed and distributed by the AAFP with support from Purdue Pharma L.P., the brochure provides helpful information on the following topics:

- How opioids work
- How opioids can be safely taken
- Do's and Don'ts for using opioids
- Recognizing overmedication or overdose and what to do in an emergency
- Safe storage and disposal of opioid pain relievers

For additional **FREE** copies of the enclosed brochure, visit www.aafp.org/safeuse. You can also visit www.familydoctor.org for more patient-education resources.

Sincerely,



Robert Kelly, MD, MS
Medical Editor, FamilyDoctor.org

Can an opioid overdose be reversed?

Naloxone is a prescription medicine that blocks the effects of opioid drugs. It quickly reverses the breathing problems that result from an opioid overdose. Naloxone can be given via injection to a person who has overdosed.

Ten U.S. states currently allow family members and friends of people taking opioids to be trained to give naloxone for a suspected overdose. If you live in one of the following states, consider asking your doctor about the training.

- California
- Connecticut
- District of Columbia
- Illinois
- Massachusetts
- New Mexico
- New York
- North Carolina
- Rhode Island
- Virginia
- Washington State

Safe storage of opioid pain relievers

If you are taking opioids, safely store them so that they are not taken by others. The abuse of opioids is a significant public safety concern. Teenagers and young adults most commonly get these medicines from their own medicine cabinets, where another family member has stored them. All opioids should be stored in a locked cabinet, lockbox, or a location where others cannot easily access them.

Store all opioids in their original bottles. Carefully note when and how much medicine you take in order to keep track of the number of pills left in your bottle.

If you think that someone has taken pills from your bottle, contact the police immediately to file a report.

Safe disposal of opioid pain relievers

Many communities have medicine take-back programs. Ask your family doctor for more information. If there is no such program in your community, the Food and Drug Administration recommends flushing unused, expired, or unwanted medicine down the toilet. The following types of opioids and their various brand-name forms can be flushed down the toilet:

- Fentanyl (including patches)
- Hydromorphone
- Meperidine
- Methadone
- Morphine
- Oxycodone
- Oxymorphone

If you are not sure about how to dispose of a medicine, ask your doctor.



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Opioid pain relievers (opioids) are used to manage acute and chronic pain. These medicines are powerful pain relievers, but they are also associated with risks of overdose and even death if abused or not taken correctly.

How do opioids work?

Opioids block pain signals in the brain. Many opioids are available in short- and long-acting forms. Short-acting forms work faster than long-acting forms, but for shorter periods. The long-acting forms — also known by their abbreviations, ER and LA — are used to treat long-lasting pain. Opioids may not safely remove all of your pain, but they will improve your daily function.

How do I safely take opioid pain relievers?

Opioids can cause unpleasant and even dangerous side effects if you take too much, take them too often, or mix them with alcohol, illegal drugs, or even other medicines. Tell your doctor about all other medicines and supplements you are taking to avoid unwanted or dangerous medication interactions. When you get your prescription filled, check the bottle to make sure that it is the right medicine prescribed for you. Read and follow the label directions carefully.

Do's and Don'ts

Do

- Always remove an old pain patch before applying a new patch.
- Talk to your doctor before changing the dosage of your pain reliever. If you miss a dose, do not take two doses without discussing this with your doctor.
- Watch for signs of overmedication and ask others to watch you for those signs.
- When taking liquid doses, use an accurate measuring device and measure out only the prescribed amount.

Don't

- Do not share opioids.
- Do not combine opioids with alcohol or street drugs.
- Never cut, chew, crush, or dissolve opioid tablets or capsules.
- Never cut, fold, or suck on a pain patch.
- Do not expose a pain patch to a source of heat, such as a heating pad, while the patch is attached to your skin.
- Do not drive a car or use heavy machinery until you have become used to the medicine's effects.
- Never take your pain reliever while in the dark to avoid taking the wrong pill or amount.

Opioid overmedication or overdose

Anyone using opioids is at risk of overmedication or overdose if they take too much. You are much more at risk of overmedication or overdose if you have never taken opioids.

Some signs of overmedication include:

- Slurred speech, stumbling while walking, dizziness, or confusion
- Excessive drowsiness or difficulty staying alert
- Difficulty waking from sleep

Some signs of overdose include:

- Cannot stay awake or if awake, is unable to speak or be kept awake
- Trouble breathing, including slow, shallow breathing or periods in which breathing stops

- Limpness, lifelessness
- Pale or clammy skin, or blue fingernails or lips
- Slow or stopped heartbeat

What to do if you think someone has taken too much medicine

If you think that someone has taken too much medicine, try to rouse him or her by using one or more of the following techniques:

- Speaking in a loud voice
- Pinching his or her ear
- Rubbing your knuckles in the middle of his or her chest

If the person responds, he or she should be kept awake for at least the next two hours. Closely watch the person to make sure further problems such as trouble breathing do not develop.

If the person does not respond:

- Call 911 immediately and tell the operator that you have a medical emergency.
- Give the operator as much information as possible, including your address and any breathing problems that the person may have.
- If the person is having trouble breathing, the operator may ask if you are trained in cardiopulmonary resuscitation (CPR). You might be asked to perform CPR if you are trained to do so.
- After calling 911, stay with the person until emergency services arrive, even if the person wakes up.

Anyone suspected of taking an overdose of opioids should see a doctor and may need to be considered for counseling and further treatment as appropriate.

