

## Prescription Painkillers Are Both a Problem and Solution

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Prescription opioid use and abuse has received a lot of attention lately. Here in Tennessee, we recently were [ranked first](#) in painkiller prescriptions per 100 people. Actions to curb this abuse have been taken by multiple regulatory bodies with mixed success.

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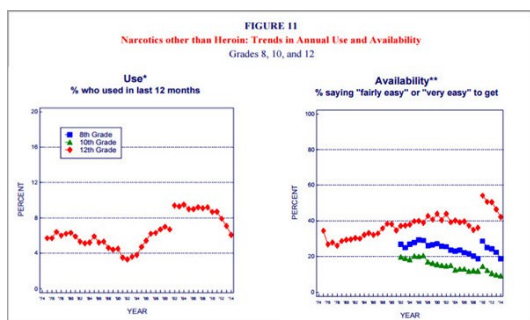


Prescription opioid use and abuse has received a lot of attention lately. Here in Tennessee, we recently were [ranked first](#) in painkiller prescriptions per 100 people. Actions to curb this abuse have been taken by multiple regulatory bodies with mixed success.

A mandatory state monitoring program significantly decreased the number of patients obtaining pain medications from multiple providers in Tennessee. On the other hand, our [state law](#) that allows a mother to be charged with misdemeanor simple assault for illegally using narcotics during pregnancy has not helped decrease the rate of neonatal abstinence syndrome.

Physicians often grumble about compliance costs associated with new regulations, and they are certainly inconvenient for providers.

But efforts to curb abuse are noble, as [44 people die each day in the United States from prescription painkiller overdose](#). Successful opioid prescription barriers may be partly responsible for the recent decline in availability and nonmedical use of prescription painkillers among adolescents, as shown in these figures from [2014 data](#) collected by the [Monitoring the Future](#) project, from the University of Michigan, Ann Arbor.



Alternatives to prescription painkillers such as massage, yoga, and hypnosis can improve pain symptoms and lessen the risk of narcotic abuse. However, we must be careful not to let the burden of prescribing stand in the way of pain management. Untreated, chronic pain can negatively affect sleep, cognitive function, and quality of life. When faced with a patient suffering from chronic pain, we should seek both pharmacologic and non-

pharmacologic interventions to reduce pain and improve the patient's level of function.

This month, *Pediatrics in Review* offers two articles to help pediatricians manage use and abuse of prescription painkillers.

In "Substance Abuse, General Principles," Drs. Kirstin Nackers and Patricia Kokotailo, of [University of Wisconsin School of Medicine and Public Health](#), Madison, and Dr. Sharon Levy, of [Boston Children's Hospital](#), write about substance abuse screening and initial treatment.

In "Pain and Symptom Management in Pediatric Palliative Care," Dr. Kelly Komatz, of the [University of Florida College of Medicine, Jacksonville](#), and Dr. Brian Carter, of the [University of Missouri-Kansas City & Children's Mercy Hospital](#) in Kansas City, MO, write about using both pharmacologic and non-pharmacologic interventions to help children with chronic medical conditions.

And if you are bending over backwards for more nonpharmacological pain management, see the October PIR article "Complementary, Holistic, and Integrative Medicine: Yoga," from Dr. Lawrence Rosen, of the [Whole Child Center](#) in Oradell, NJ, Dr. Anu French, of [SSM Cardinal Glennon Children's Medical Center](#), St. Louis, MO, and Grace Sullivan, RYT-200, of [Williams College](#) in Williamstown, MA.

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#### Further Reading

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