

# EMORY PAIN CENTER

## News You Can Use

AUG-SEPT 2017

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### Association Between Commonly Prescribed Opioids and Androgen Deficiency in Men: A Retrospective Cohort Analysis

#### KEY POINTS:

- Taking opioids (narcotics) every day has risks, androgen deficiency (low testosterone) is one of them
- 1159 men using chronic opioids were tested for testosterone levels
- The percent patients who had low testosterone by opioid was:
  - Fentanyl 69.2%
  - Methadone 60.8%
  - Morphine 52.1%
  - Oxycodone 50.4%
  - Hydromorphone 42.9%
  - Hydrocodone 34.2%
- The effect was dose related.
- Obesity, diabetes and high blood pressure was also associated with low testosterone.

**WHAT THIS MEANS FOR YOU:** *One of the long term effects of taking opioids (narcotics) is lowering your testosterone.*

Pain Medicine 2017;18:637-644

### Resting-state functional connectivity predicts longitudinal pain symptom change in urologic chronic pelvic pain syndrome: a MAPP network study

#### KEY POINTS:

- Brain functional connectivity could predict short-term (3 month) pain reduction with 73.1% accuracy.
- Brain regions with the greatest contribution were aligned with the left frontoparietal network, which has been previously associated with sensory, emotional, and motor task GOALS and EXPECTATIONS
- Patients who are more likely to improve may have higher expectation of improvement (i.e. increased placebo effect), leading to better outcomes in the 3 month period.

Pain 2017;158:6:1069-1082.

**WHAT THIS MEANS FOR YOU:** *If you think that you're going to get better, changes will occur in your brain so that treatments become more effective*

## EMORY PAIN CENTER

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### Pain Catastrophizing Moderates Relationships between Pain Intensity and Opioid Prescription

#### KEY POINTS

- Pain catastrophizing is a flood of negative thoughts and emotions in response to actual or anticipated pain
- Catastrophizing increases pain intensity, disability, and is a risk factor for misusing opioids
- This retrospective study included 1794 new chronic pain patients who completed the Pain-CHOIR electronic questionnaire at Stanford's Pain Clinic, which includes the Pain Catastrophizing Scale (PCS).
- Patients who received opioids were more likely to have higher catastrophizing, higher pain levels, and higher depression.
- Pain catastrophizing had greater association with opioid prescribing in women relative to men.

Anesthesiology 2017;127:00-00(epub ahead of print)

**WHAT THIS MEANS FOR YOU:** *The way you respond to pain is important. It can result in higher pain, depression and a higher use of opioids*