



**American Society of Enhanced Recovery (ASER) Public Statement**  
**Minimizing Opioid use for Pain Management after an Operation**  
*Alternatives, Safe Use, Storage, and Disposal*

Nearly 100 Americans are dying from opioid overdose daily. Addressing this crisis will require a collective approach from many in government and healthcare industry. However, patients and care givers need to be active partners in this journey. This message by the American Society for Enhanced Recovery (ASER) is to inform and educate the general public of safe options to decrease the need for opioids around the time of surgery and avoid side effects or misuse.

Prescription opioids can lead to abuse and addiction and they have many side effects such as upset stomach, constipation, difficulty urinating, itchiness, sleepiness and delirium. ASER suggests the best pain goal is not a “pain free” state, but being comfortable enough for activity, breathing exercises, normal eating, and sleeping. Returning to normal activity levels helps patients recover faster.

ASER recommends that care teams and patients work together to create a plan for pain control around the time of surgery. There are many choices for decreasing the use of opioid medicines including a combination of non-opioid medicines and/or options should be used whenever possible.

- Non-opioid medicines including acetaminophen (Tylenol®), non-steroidal anti-inflammatory drugs (NSAIDs) (Ibuprofen® or Motrin®), and drugs to prevent nerve pain may be taken on a regular basis before and after surgery to reach a comfort level for recovery.
- Nerve blocks, numbing the surgical area, can be placed.
- Non- medicine options, such as ice, heat, compression, positioning with pillows, distraction with music or television, aromatherapy, and relaxation can be very helpful to decrease the use of opioids around surgery.

If a prescription pain medicine is still needed, follow these safety guidelines:

- Do not mix opioids with alcohol or other drugs
- Take medicines only as prescribed: never take more than is prescribed
- Use only your own prescriptions; never take somebody else’s medicine
- Never give or sell your medicine to others
- Do not use opioids for anything except pain. Using opioids for anything other than pain (i.e. anxiety, sleep, fear of pain, to feel good) can lead to dependence or addiction

When opioid medicines are prescribed for use outside of the hospital, follow these rules:

- Keep all opioid medicines locked in a safe place in your home
- Keep medicines in the original prescription bottle



- If there are children in the house, have the pharmacy provide a childproof top
- If your prescription opioids are lost or stolen, report it to the police department

To get rid of unused prescription opioid medicines:

- Turn in unused medicine in a take-back container at a pharmacy, police station, or fire department (<https://www.deadiversion.usdoj.gov/pubdispsearch>).
- Destroy unused medicines, if there is not a medicine take-back program in your area. Make the medicine unusable:
  - Mix medicine in kitty litter, used coffee grounds, or multi-purpose liquid glue, (such as school glue), and
  - Place the mixture in a sealed plastic bag in household trash

Our goal is to recommend plans for best results as well as decreasing possible side effects of opioids for surgical patients. Please bring this statement to appointments with your surgeon or anesthesia provider to talk about your plan for pain control.

# Optimal Pain Management After Surgery and Beyond: It's About More Than Just Pain Scores

## 1 EDUCATION: Reliable Information

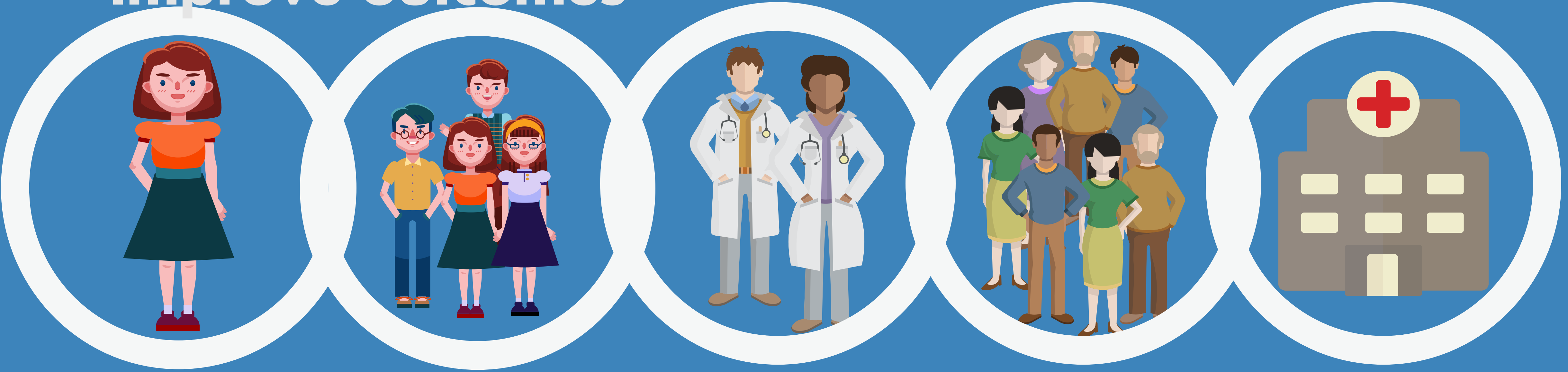
80% of heroin users were first exposed to prescription opioids

10% research has reported up to 10% of patients may become chronic opioid users after surgery

- OPIOIDS have SIDE EFFECTS that can DELAY your recovery
- MANY non-opioid options give EFFECTIVE pain control: acetaminophen, ibuprofen, nerve blocks (to numb the incision), & non-medicine options like music, ice/heat, meditation

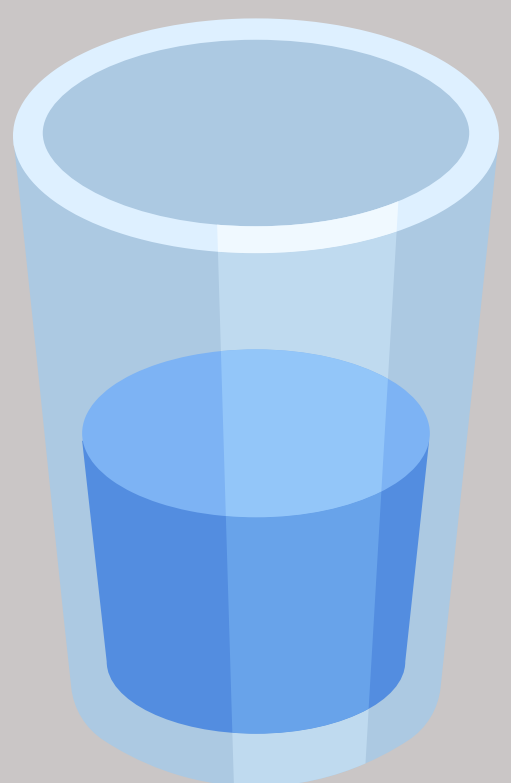


## 2 ENGAGEMENT: Linking patients, families, clinicians, communities, and healthcare systems to improve outcomes



## 3 EMPOWERMENT:

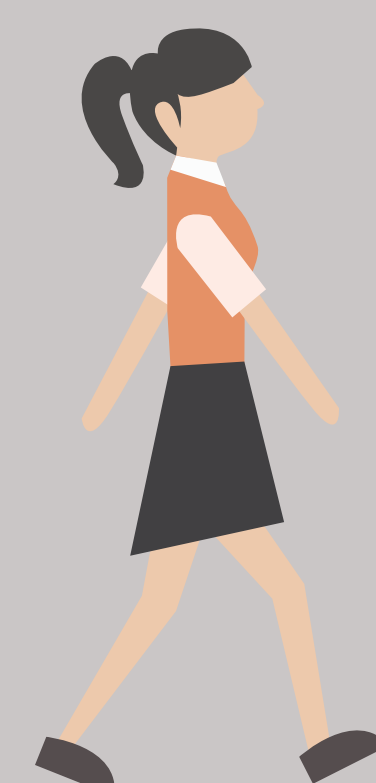
Education + Engagement = **FASTER** Recovery



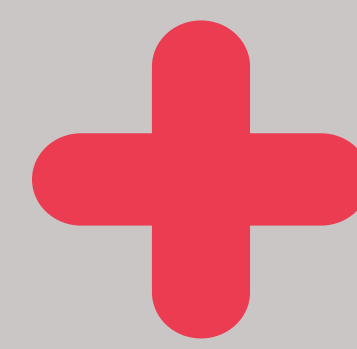
Drinking



Eating

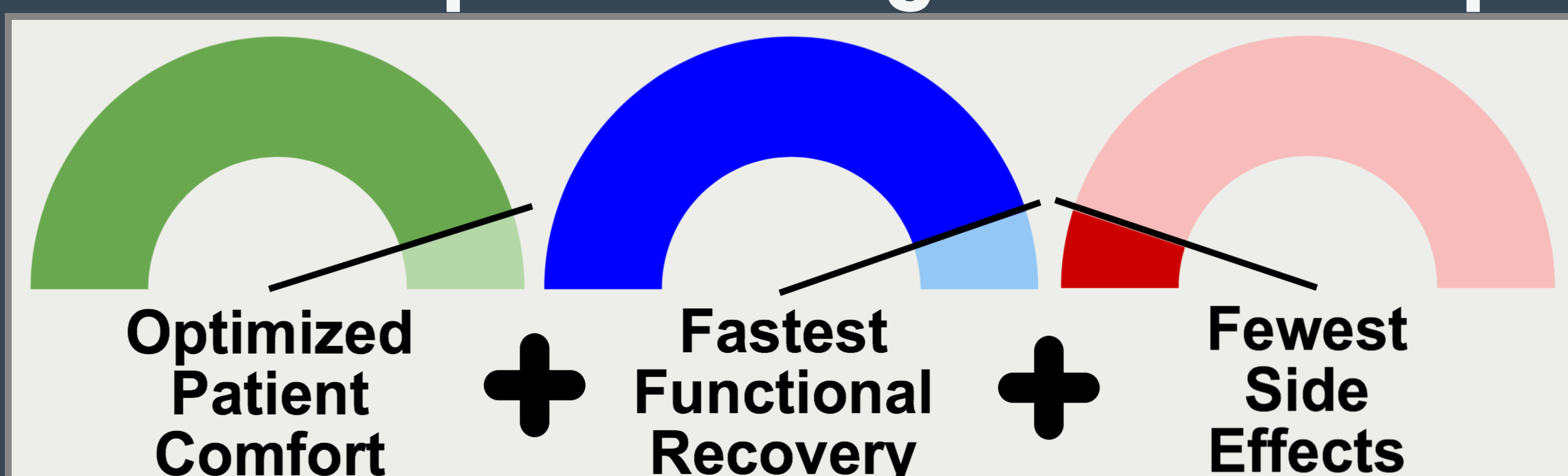


Walking



Sleep

## 4 EXPERIENCE: Optimal Analgesia = Best Experience



For more information, go to [ASERhq.org](http://ASERhq.org)  
Twitter: @ASER\_hq      FB: [facebook.com/ASERonline](https://facebook.com/ASERonline)



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