

This policy exists to promote safe, effective, and responsible treatment of pain, anxiety, and other conditions while minimizing the risks associated with controlled substances. Our goal is to prioritize function, long-term health, and patient safety.

Chronic Pain: Opioid Medications

Opioid medications are generally our last choice for the management of chronic pain. In most circumstances, addressing underlying health issues, using non-opioid medications, engaging in physical or manual therapies (such as physical therapy, rehabilitation, massage, or acupuncture), and making lifestyle changes related to diet, exercise, sleep, and stress management can significantly reduce and manage chronic pain.

Long-term or frequent use of opioids carries significant risks, including tolerance, dependence, withdrawal, overdose, and decline in physical and cognitive function. While there are certain severe medical conditions that may require extended opioid therapy, these situations are uncommon and are evaluated on a case-by-case basis.

This policy primarily applies to chronic or ongoing opioid use. Short-term or limited opioid use may be considered in select circumstances at the physician's discretion.

Any consideration of opioid therapy requires review of relevant medical records, prescription drug monitoring program (PDMP) data, and a discussion of risks, benefits, and functional goals.

There are certain conditions for which long-term opioid therapy is generally not appropriate and will not be prescribed in this practice, including but not limited to:

- Chronic back pain due to most cases of degenerative disc disease, muscle spasms, or non-specific causes
- Primary headache disorders, including migraine and tension-type headaches
- Fibromyalgia or other central pain syndromes

Anxiety and Panic Disorders: Benzodiazepines

Benzodiazepines are a class of medications sometimes used for acute anxiety or panic symptoms. Long-term or frequent use carries significant risks, including dependence, tolerance, cognitive impairment, and adverse effects on physical and mental health. These risks are particularly pronounced with shorter-acting agents such as alprazolam (Xanax) and lorazepam (Ativan).

For long-term management of anxiety and panic disorders, several non-benzodiazepine medications, psychotherapy, and behavioral techniques have been shown to be safer and more effective. As a result, this practice does not prescribe benzodiazepines for long-term or routine management of anxiety or panic disorders.

Limited or short-term use may be considered in select situations at the physician's discretion.

Additional Safety Considerations

Use of controlled substances may require additional agreements, monitoring, periodic reassessment, and documentation. Continuation of any controlled substance is never guaranteed and is always re-evaluated based on safety, effectiveness, and clinical appropriateness.

If you have questions about this policy or how it applies to your care, we encourage open discussion with your physician.