MATHEWS JOURNAL OF NURSING AND HEALTH CARE



ISSN:2692-8469

Commentary Article

Vol No: 02, Issue: 02

Received Date: November 11, 2020 Published Date: November 27, 2020

Mishiko L. Redd*

Nancy S. Goldstein

Johns Hopkins University School of Nursing, Baltimore, MD 21205, United States

*Corresponding Author:

Mishiko Redd

Johns Hopkins University School of Nursing, Baltimore, MD 21205, United states

E-mail: mredd6@jhu.edu

Substance Use Disorders and Alternative Options for Chronic Pain

Chronic low back pain is a condition that lasts, at minimum, twelve weeks or greater [1]. This condition is typically treated with a medication regimen that includes opioids, the most highly prescribed class of medications for chronic pain. The liberal use of opioids to relieve chronic pain has led to the abuse causing substance use disorders (SUD) to increase over the past few decades [2]. SUD is a disease affecting a person's brain and behavior. It is characterized by an individual's continuous use of a substance (alcohol, heroin, cocaine, benzodiazepines, etc.), thus increasing the risk for developing serious health problems [3,4]. Consequently, those individuals who have a history of SUD have unique challenges when dealing with chronic pain.

There is limited evidence in the literature that shows the benefit of treating chronic pain with only opioids [5]. A patient is more likely to manage pain successfully when alternative treatments are provided in conjunction with pain medications. However, there continues to be a lack of non-pharmacological treatments in reducing pain levels in the SUD population. Pain, especially low back pain, affects millions of people on a global scale. This chronic condition causes expenditures to increase to the billions and is the cause for upward of eighty – five percent of visits to primary care providers [6,7]. Some literature has shown that alternative methods assist SUD patients in managing the burden of experiencing chronic or low back pain, which can elicit a more sober lifestyle [5].

Pain, a chronic disease, has physical and emotional outcomes that can interfere with activities of daily living (SAMHSA, n.d.). It is one of the most common reasons patients seek medical care [8]. The prevalence, over the last decade, has doubled and is non-discriminatory affecting both males and females of any ethnicity or race [1,8]. The numbers of those living with pain are expected to increase and continue to place a burden on healthcare spending costs, loss of wages, and reduction of work productivity [1].

There is minimal evidence available to make a concise conclusion of how physical activity can assist in the improvement of chronic low back pain for the SUD population. Research that is available suggests a decrease in the cost of healthcare expenses when physical activity is used consistently in a population without a problem of addiction. Further research is recommended to explore the SUD populations, chronic pain, and their experience with a consistent physical activity regimen.

REFERENCES

- Allegri M, Montella S, Salici F, Valente A, Marchesini M, et al. (2016). Mechanisms of low back pain: a guide for diagnosis and therapy. F1000Research, 5, F1000 Faculty Rev-1530. doi:10.12688/f1000research.8105.2.
- Dasgupta N, Beletsky L, Ciccarone D. (2018). Opioid crisis: no easy fix to its social and economic determinants. American Journal of Public Health. 108(2):182–186. doi:10.2105/AJPH.2017.304187.
- 3. Lo Coco G, Melchiori F, Oieni V, Infurna MR, Strauss B, et al. (2019). Group treatment for substance use disorder in adults: A systematic review and meta-analysis of randomized-controlled trials. Journal of Substance Abuse Treatment. 99:104–116. https://doi.org/10.1016/j. jsat.2019.01.016.
- Substance Abuse and Mental Health Services Administration (2019) Mental Health and Substance Use Disorders. Retrieved on May 5th, 2016. Available from http://www.samhsa.gov/disorders/substance-use.
- 5. Ballantyne JC, Sullivan MD. (2015). Intensity of chronic

- pain the wrong metric? New England Journal of Medicine. 373:2098-2099. DOI: 10.1056/NEJMp1507136.
- Amorim AB, Pappas E, Simic M, Ferreira ML, Jennings M, et al. (2019). Integrating mobile-health, health coaching, and physical activity to reduce the burden of chronic low back pain trial (IMPACT): a pilot randomised controlled trial. BMC Musculoskeletal Disorders. 20(1). https://doi. org/10.1186/s12891-019-2454-y.
- Toelle TR, Utpadel-Fischer DA, Haas KK, Priebe JA. (2019). App-based multidisciplinary back pain treatment versus combined physiotherapy plus online education: a randomized controlled trial. Digital Medicine. 10.1038/ s41746-019-0109-x.
- Dahlhamer J, Lucas J, Zelaya C, Nahin R, Mackey S, et al. (2018). Prevalence of chronic pain and high impact chronicpain among adults United States, 2016. CDC: Morbidity and Mortal Weekly Report. 67:1001–1006. DOI:http://dx.doi.org/10.15585/mmwr. mm6736a2external icon.

Copyright: Redd ML, Goldstein NS. ©2020. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.