

CLINICAL PRACTICE GUIDELINES

PATIENT INFORMATION

FREQUENTLY ASKED QUESTIONS (FAQs) COMPARING NONOPIOID AND OPIOID MEDICATIONS

Frequently Asked Questions	Opioids	Nonsteroidal Antiinflammatory Drugs (NSAIDs)	Acetaminophen	Gabapentinoids
CAN I BE ADDICTED TO THIS?	Yes	No	No	Yes
WHEN ARE THEY USED—WHAT LEVEL OF PAIN?	Severe pain	Mild - Severe	Mild - Severe	Mild - Moderate
SHOULD I START WITH THIS MEDICATION?	No, use only if around-the-clock nonopioid medications are not enough.	Yes, you may start with this medication.	Yes, you may start with this medication.	No, only use if NSAIDs and/or acetaminophen is not enough.
IS THIS USED ALONE OR WITH OTHER MEDICATIONS?	Should be used in combination with other pain medications.	Can be used alone or in combination.	Can be used alone or in combination.	Should be used in combination with other pain medications.
CAN I STOP USING THIS MEDICATION AND HOW DO I STOP?	Sometimes this needs to be slowly stopped (“tapered”) depending on how much you have taken. Talk about this with your health care provider.	This can be stopped at any time.	This can be stopped at any time.	Sometimes this needs to be slowly stopped (“tapered”) depending on how much you have taken. Talk about this with your health care provider.

SOURCE: Anne SA, Mims JW, Tunkel DE, et al. Clinical practice guideline: opioid prescribing for analgesia after common otolaryngology operations. *Otolaryngol Head Neck Surg.* 2021;164(2_suppl):S1-S42.



www.entnet.org

ABOUT THE AAO-HNS/F

The American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS) represents approximately 12,000 specialists worldwide who treat the ear, nose, throat, and related structures of the head and neck. The AAO-HNS Foundation works to advance the art, science, and ethical practice of otolaryngology-head and neck surgery through education, research, and lifelong learning.

CLINICAL PRACTICE GUIDELINES

PATIENT INFORMATION

FREQUENTLY ASKED QUESTIONS (FAQs) COMPARING NONOPIOID AND OPIOID MEDICATIONS

Frequently Asked Questions	Opioids	Nonsteroidal Antiinflammatory Drugs (NSAIDs)	Acetaminophen	Gabapentinoids
WHAT ARE THE COMMON SIDE EFFECTS (REPORTED IN 3% OR MORE PATIENTS)?	Dizziness, nausea (very common), headache, drowsiness (feeling sleepy or tired), vomiting, dry mouth, itching, and constipation.	Upset stomach	Nausea, vomiting, headache, and insomnia (being unable to sleep).	Dizziness, drowsiness (feeling sleepy or tired), swelling in the hands and feet, weight gain, and blurred vision.
WHAT ARE THE SERIOUS RISKS AND WHAT IS THE RISK OF ADDICTION OR DEPENDENCE?	Respiratory depression (very slow breathing), misuse, abuse, addiction, overdose, and death from respiratory depression. Your risk of opioid abuse increases the longer you take the medication.	Stomach bleeding or ulcers, heart attack, kidney damage, and stroke. Celecoxib has a lower risk of stomach bleeding and/or ulcer formation over the short term.	Liver damage may occur at high doses (greater than 3,000 milligrams in 24 hours).	Suicidal thoughts, respiratory depression. Risks increase if you have kidney, liver, or heart disease or have suicidal thoughts.

Adapted from the American College of Surgeons' patient education brochure on *Safe and Effective Pain Control After Surgery*.¹²

SOURCE: Anne SA, Mims JW, Tunkel DE, et al. Clinical practice guideline: opioid prescribing for analgesia after common otolaryngology operations. *Otolaryngol Head Neck Surg.* 2021;164(2_suppl):S1-S42.



www.entnet.org

ABOUT THE AAO-HNS/F

The American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS) represents approximately 12,000 specialists worldwide who treat the ear, nose, throat, and related structures of the head and neck. The AAO-HNS Foundation works to advance the art, science, and ethical practice of otolaryngology-head and neck surgery through education, research, and lifelong learning.