Chronic opioid therapy in elder patient with fibromyalgia syndrome: Case report

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Pain-control is an important factor to improve life quality, especially in patients with chronic non-cancer pain. According to the research of the American Geriatrics Society, fibromyalgia syndrome is one of the most common and easily misdiagnosed conditions which cause chronic pain in the elderly. Opioids would be a choice when other treatments failed. However, clinicians should concern the risks, including overdose poisoning, misuse or addiction and evaluate it regularly. Although the evidence of chronic opioid therapy is rare in fibromyalgia, life quality got improved obviously in this case. A 65-year-old male had 10 years history of hypertension and 5 years history of benign prostatic hyperplasia. He suffered persistent severe left chest wall pain treated by orthopedic clinic (VAS 9) and fibromyalgia was highly suspected in Nov. 2012. Since conventional medical treatments didn't work, the neurosurgeon decided to use opioid (fentanyl 25 mcg/hour patch, 1 patch Q3D) with tramadol 37.5 mg/acetaminophen 325 mg to relieve his pain (VAS 3-4) and he also visited psychiatrist twice per year. In 2014, the doctor prescribed duloxetine 30 mg and tapered the dosage of fentanyl (from 25-12 mcg/H Q3D) which helps him in a relatively stable condition. The evidence of chronic opioid therapy (COT) in fibromyalgia is rare; even some guidelines are not recommended. However, opioids have the strongest analgesic effect in the treatment of chronic pain. The American Pain Society and the American Academy of Pain Medicine concluded that COT can be an effective therapy for carefully selected and monitored patients with persistent pain to improve pain control.

Biography

Yun-Wei Lai is working in Taipei City Hospital Renai Branch after graduating from China Medical University, Department of Pharmacy since 2007.

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