



WYOMING LEGISLATIVE SERVICE OFFICE

Fact Sheet

SUMMARY OF UPDATE TO THE CDC CLINICAL PRACTICE GUIDELINE FOR PRESCRIBING OPIOIDS FOR PAIN

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QUESTIONS:

- What is the current CDC Clinical Practice Guideline for Prescribing Opioids for Pain?
- What changes were made when the guideline was updated in 2022?

ANSWER:

The CDC Clinical Practice Guideline for Prescribing Opioids for Chronic Pain was first published in 2016 to provide recommendations for opioid prescriptions and was updated in 2022 based on new evidence of the risks of prescription opioids, nonopioid pain treatment, and other opioid use factors. The 2022 guideline provides 12 recommendations and five guiding principles, including acute, subacute, and chronic pain treatment provided by an expanded range of clinicians. The 2022 guideline emphasizes patient-centered care and clinician-patient partnering when considering pain treatment options and dissuades adherence to rigid opioid dosage thresholds.

DISCUSSION:

THE 2016 CDC CLINICAL PRACTICE GUIDELINE

The Centers for Disease Control and Prevention (CDC) published the CDC Clinical Practice Guideline for Prescribing Opioids for Chronic Pain in 2016 to provide recommendations for primary care clinicians prescribing opioids for chronic pain outside of active cancer treatment, palliative care, and end-of-life care.¹ The 2016 guideline was voluntary and intended to be flexible to support, not supplant, individualized, patient-centered care.² The guideline's goals were to:

1. Ensure clinicians and patients considered safer and more effective pain treatment options;
2. Improve patient outcomes; and

¹ Deborah Dowell et al, *CDC Clinical Practice Guidelines for Prescribing Opioids for Chronic Pain – United States, 2016* (2016), https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm#B1_down.

² Deborah Dowell et al, *CDC Clinical Practice Guidelines for Prescribing Opioids for Pain – United States, 2022* (2022), https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s_cid=rr7103a1_w.

3. Reduce the number of persons who developed opioid use disorder.³

THE 2022 CDC CLINICAL PRACTICE GUIDELINE⁴

The CDC updated the 2016 guideline in November 2022 based on new evidence that has emerged since 2016 regarding the benefits and risks of prescription opioids, comparisons with nonopioid pain treatments, dosing strategies, opioid dose-dependent effects, risk mitigation strategies, and opioid tapering and discontinuation. The 2022 guideline does not focus on recommendations for opioids used specifically as medications for opioid use disorder.

The 2022 guideline provides 12 recommendations for prescribing opioids grouped into four areas:

1. Determining whether or not to initiate opioids for pain (Recommendations 1, 2);
2. Selecting opioids and determining opioid dosages (Recommendations 3, 4, 5);
3. Deciding duration of initial opioid prescription and conducting follow-up (Recommendations 6, 7); and
4. Assessing risk and addressing potential harms of opioid use (Recommendations 8, 9, 10, 11, 12).

In addition, the guideline provides five guiding principles to broadly inform the implementation of its recommendations:

1. Acute, subacute, and chronic pain needs to be appropriately assessed and treated independent of whether opioids are part of a treatment regimen;
2. Recommendations are voluntary and are intended to support, not supplant, individualized, person-centered care. Flexibility to meet the care needs and the clinical circumstances of a specific patient is paramount;
3. A multimodal and multidisciplinary approach to pain management attending to the physical health, behavioral health, long-term services and supports, and expected health outcomes and well-being of each person is critical;
4. Special attention should be given to avoid misapplying this clinical practice guideline beyond its intended use or implementing policies purportedly derived from it that might lead to unintended and potentially harmful consequences for patients; and
5. Clinicians, practices, health systems, and payers should vigilantly attend to health inequities; provide culturally and linguistically appropriate communication, including communication that is accessible to persons with disabilities; and ensure access to an appropriate, affordable, diversified, coordinated, and effective nonpharmacologic and pharmacologic pain management regimen for all persons.

DIFFERENCES BETWEEN THE 2016 AND 2022 CLINICAL PRACTICE GUIDELINES

The 2022 guideline provides updated recommendations for prescribing medications for acute, subacute, and chronic pain for outpatients of age 18 years or older, excluding pain management related to sickle cell disease, cancer-related pain treatment, palliative care, and end-of-life care.⁵ The 2016 guideline focused on recommendations for primary care physicians while the 2022

³ *Id.*

⁴ *Id.*

⁵ *Id.*

guideline expands recommendations to include additional clinicians like oral health providers and clinicians providing pain management for patients discharged from emergency departments.⁶

The updated recommendations emphasize flexible, patient-centered care and focus on shared decision making with any treatment changes.⁷ The 2016 guideline supported morphine dosing thresholds, which were often rigidly applied with limited flexibility for individualized care.⁸ The 2022 guideline instead focuses on providing a full range of pain management options that can help clinicians partner with patients to provide the best care.⁹ The 2022 guideline reiterates that clinicians should prescribe opioids at the lowest effective dose for the expected duration of pain but emphasizes patient consultation and preferences when starting or tapering opioids.¹⁰ A recommendation added to the 2022 guideline outlines the use of prescription drug monitoring or high-sensitivity screening questions to determine whether patients are receiving opioid prescriptions that create a high overdose risk.¹¹

⁶ *Id.*

⁷ Melanie R. Smith, *FAQ: CDC Opioid Prescribing Guideline Updates*, ASHP Research and Education Foundation, 1 (2023), <http://12.53.28.72/-/media/assets/pharmacy-practice/resource-centers/ambulatory-care/docs/2022-CDC-Opioid-Prescribing-Guideline-Updates.pdf>.

⁸ Deborah Dowell et al, *CDC Clinical Practice Guidelines for Prescribing Opioids for Pain – United States, 2022* (2022), https://www.cdc.gov/mmwr/volumes/71/rr/rr7103a1.htm?s_cid=rr7103a1_w.

⁹ Melanie R. Smith, *FAQ: CDC Opioid Prescribing Guideline Updates*, ASHP Research and Education Foundation, 2 (2023), <http://12.53.28.72/-/media/assets/pharmacy-practice/resource-centers/ambulatory-care/docs/2022-CDC-Opioid-Prescribing-Guideline-Updates.pdf> (The 2022 guideline does not eliminate the morphine threshold guidance but seeks to dissuade the adherence to rigid opioid dosage thresholds).

¹⁰ Ameya Gangal, Benjamin Stoff, Travis Blalock, *The 2022 CDC Opioid Prescription Guideline Update: Relevant Recommendations and Future Considerations*, JAAD International (2023), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10477793/>.

¹¹ *Id.*