

Alternatives to Opioids in Treating Adults with Acute and Chronic Back Pain:

Systematic Review

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Abstract

Acute and chronic back pains especially in the present, require proper treatments to ensure that these patients don't experience discomfort during their daily operations including rest, work, and sleep. This review aims at familiarizing the types of back pains that are acute, subacute, and chronic back pains as well as their treatment methods especially those other than opioid treatments. Critical analysis of risks and side effects of opioids have been compared to those of the other treatment types to gain insight into those with the least risks and side effects. This research utilized the Google Scholar, EBSCO, LexisNexis Academic, as well as Journal Storage (JSTOR) to screen through approximately 900 abstracts on alternative treatments for acute and chronic back pains, their effectiveness, risks, and side effects.

From the ten articles under systematic review, information about many alternative treatments for back pain were obtained. It was also established that most of these alternative treatments to opioids have fewer risks as well as side effects. These treatments can be divided into four groups, that is, over-the-counter medicines, nondrug treatments, and interventional therapies for easy analysis, each of which have their advantages, risks, and efficiency. Opioids have numerous lethal side effects compared to other acute and chronic back pain treatments.

Alternative back pain treatments other than opioids are effective and in combinations can yield better results. These alternative treatments excluding over-the-counter medicines have no major side effects and instead have benefits such as keeping users fit and healthy. Although this study recommends a combination of treatments that yield better results within the shortest time, more research should be conducted to ascertain the most effective treatments.

Keywords: chronic back pain, acute back pain, cold and heat therapy, massage, exercise, acupuncture, NSAIDS, paracetamol, COX-2 inhibitors, psychological therapies.

