THE OPIOID EPIDEMIC & SMOKING

Quick Facts

1) SMOKING IS A RISK FACTOR FOR NONMEDICAL USE OF PRESCRIPTION OPIOIDS

3) THERE IS A SIGNIFICANT ASSOCIATION BETWEEN SMOKING & PAIN

2) DAILY & INTERMITTENT SMOKERS ARE 3X MORE LIKELY TO REPORT PAST-YEAR NONMEDICAL PRESCRIPTION OPIOID USE

85%

4) OF PATIENTS IN TREATMENT FOR OPIOID ADDICTION SMOKE

(HIGHER THAN ALCOHOL USE DISORDER)

5) NICOTINE MAY
ENHANCE THE
REWARDING
PROPERTIES OF
OPIOID MEDICATIONS
TO THE NEURAL
SYSTEM

6) PAIN CAN
INCREASE SMOKING
AND THE
MAINTENANCE OF
TOBACCO ADDICTION
CREATING A POSITIVE
FEEDBACK LOOP

7) ACTION STEP:
ALWAYS TAKE INTO ACCOUNT
TOBACCO USE WHEN ASSESSING
THE ABUSE POTENTIAL OF
PRESCRIBING OPIOIDS

Smoking Cessation Leadership Center

The Opioid Epidemic and Smoking

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Prescription Opioid Misuse & Smoking

It is a vital time for public health to address smoking as a risk factor for opioid misuse.

The opioid epidemic has been a growing public health crisis for years, and given the recent rise of overdose deaths, there's no time like the present for health care providers to address associated risk factors, such as smoking.

Currently, research and literature on the association between **smoking** / **nicotine dependence and prescription opioid misuse among the general population** are limited, but the available facts are alarming.

Furthermore, empirical evidence has shown that there is a significant association between smoking and pain, and smokers tend to have a higher intensity of pain compared to non-smokers, putting them at higher risk of opioid misuse/dependency.

A key takeaway for providers: Addressing tobacco use with patients being treated for pain may be useful in reducing pain, as well as reducing the need for pain medication.

References

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