

Table 1: Side Effects Associated With Opioid Therapy

Common Side Effects	Comment
Constipation	Tolerance may develop very slowly or not at all; particularly challenging in those with other predisposing factors, e.g. advanced age, other constipating drugs, and disease or dietary factors
Somnolence and cognitive impairment	Usually transitory, occurring at the start of therapy, or for a period of days after dose increases; can be persistent, particularly if there are other predisposing factors, e.g., other centrally-acting drugs or organic brain disease
Less Common Side Effects	
Other gastrointestinal effects	Nausea, pyrosis, bloating, anorexia are all possible; symptoms are usually transitory but can be persistent occasionally
Uncommon Side Effects	
Itch	
Urinary retention	
Myoclonus	
Headache	
Other Concerns	
Hypogonadism	Probably common; possible contribution to fatigue, sexual dysfunction, and osteoporosis
Dysimmune effects	Can be demonstrated in vitro; pain itself has dysimmune effects and the clinical relevance of the effects produced by the opioids is not known
Opioid-induced hyperalgesia	Can be demonstrated in animal models; although the clinical implications are theoretical, it is reasonable to conclude that a patient who appears to worsen as the dose is increased should be considered for a trial of a nonopioid intervention, perhaps followed by tapering of the opioid dose
Respiratory depression	Rare if dose titration is performed appropriately; subclinical effect on respiratory functions occurs during well tolerated therapy and the response to naloxone during an episode of ventilatory compromise does not indicate that the opioid is the primary reason for the problem