

# spotlight on health

## A New Treatment For A Common Side Effect Of Opioid Pain Management

(NAPSA)—Each year, more than 1.5 million Americans receive palliative care due to an advanced illness, such as incurable cancer, end-stage heart and lung disease, or AIDS. Many of these patients are prescribed opioids to manage their pain. In fact, opioids were the fourth-largest category of prescription drugs on the market in 2006, accounting for almost 6 percent of the total prescription drug industry.

While opioids are considered to be effective at reducing pain, they are often accompanied by side effects that can interfere with pain management. One of the most common and potentially distressing of these side effects is opioid-induced constipation (OIC). OIC can be difficult to manage and may be severe enough to limit opioid use.

"Opioid analgesics are the mainstay therapy for pain management in advanced-illness patients receiving palliative care," says Jay Thomas, M.D., Ph.D., Clinical Medical Director of San Diego Hospice and The Institute for Palliative Medicine. "When we use opioids for severe symptoms, we commonly counsel about many side effects, but the most common that doesn't go away with time typically is opioid-induced constipation."



There is a new treatment that may help patients with an advanced illness receiving palliative care.

#### **Managing Pain**

Opioids provide pain relief by interacting with a specific type of opioid receptor within the brain and spinal cord. However, when opioids interact with specific receptors within the gut, bowel function is inhibited, resulting in constipation. Patients suffering from OIC may experience dry hard stools, straining during evacuation, incomplete evacuation, bloating, and abdominal distention. Other associated symptoms of OIC include vomiting and abdominal discomfort or pain.

Judy Lentz, RN, MSN, NHA, Chief Executive Officer of the Hospice and Palliative Nurses Association, says that controlling side effects such as constipation is necessary for pain management.

"It is critical that we manage physical symptoms, like OIC, to help patients focus on what's important at this time in their lives," says Lentz.

#### **A New Treatment Option**

There's now a new treatment option for this condition. The United States Food and Drug Administration (FDA) has approved Relistor™ (methylnaltrexone bromide), a subcutaneous injection for the treatment of constipation that is caused by prescription pain medicines, called opioids, in patients receiving supportive care for their advanced illness, when other medicines for constipation, called laxatives, have not worked well enough. The most common side effects of Relistor in clinical studies were abdominal pain, gas, and nausea. Relistor works on the underlying cause of the condition to decrease the constipating effects of opioids on the gut without interfering with centrally mediated pain relief.

"I'm so pleased that we now have a new treatment option to provide relief to advanced-illness patients with OIC," says Dr. Thomas, who was an investigator in the drug's clinical trials.

For more information about this treatment, visit www. RELISTOR.com.

### Note to Editors: Important Safety Information for Relistor

Relistor is contraindicated in patients with known or suspected mechanical gastrointestinal obstruction. If severe or persistent diarrhea occurs during treatment, advise patients to discontinue therapy with Relistor and consult their physician. Use of Relistor has not been studied in patients with peritoneal catheters. The most common adverse reactions with Relistor in clinical trials were abdominal pain, flatulence, and nausea. Relistor Prescribing Information is available at www.Relistor.com.