

Glossary of Terms

Opioids and Public Health

2017

This short glossary is designed to accompany a teaching pack on the global pain epidemic, focusing specifically on opioid use and palliative care. The Global Health Education and Learning Incubator at Harvard University has also developed companion teaching materials on this subject, including an annotated bibliography on the global pain epidemic, as well as a lesson plan that incorporates an instructor's note and learning objectives.

Note: Sources for terms below are noted in parentheses at the end of each entry, with additional information at the end of this document.

Acute pain: Pain that usually starts suddenly and has a known cause, like an injury or surgery. It normally gets better as your body heals and lasts less than three months. (Centers for Disease Control and Prevention 2017)

Addiction: Combination of the physical dependence on, behavioral manifestations of the use of, and subjective sense of need and craving for a psychoactive substance, leading to compulsive use of the substance either for its positive effects or to avoid negative effects associated with abstinence from that substance. (Substance Abuse and Mental Health Services Administration 2005)

Agonist: A substance that acts at a neuronal receptor to produce effects similar to those of a reference drug; for example, methadone is a morphine-like agonist at the opioid receptors. (World Health Organization 1994)

Analgesic: A compound that alleviates pain without causing loss of consciousness. Opioid analgesics are a class of compounds that bind to specific receptors in the central nervous system to block the perception of pain or affect the emotional response to pain. Such compounds include opium and its derivatives, as well as a number of synthetic compounds. Chronic administration or abuse of opioid analgesics may lead to addiction. (Substance Abuse and Mental Health Services Administration 2005)

Basic pain medicines: Non-opioid pain medicines suitable for mild pain. These include paracetamol (also known as acetaminophen), aspirin, diclofenac, and ibuprofen. (Human Rights Watch 2011)

Benzodiazepines: Sometimes called “benzos,” these are sedatives often used to treat anxiety, insomnia, and other conditions. Combining benzodiazepines with opioids increases a person's risk of overdose and death. (Centers for Disease Control and Prevention 2017)

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Buprenorphine: A partial opioid agonist for the treatment of opioid addiction that relieves drug cravings without producing the “high” or dangerous side effects of other opioids. (National Institute on Drug Abuse 2014)

Chronic pain: Pain that occurs over weeks, months, or years, rather than a few hours or a few days. Because of its duration, moderate to severe chronic pain should be treated with oral opioids rather than repeated injections, especially for children and people who are emaciated by diseases such as cancer and HIV/AIDS. (Human Rights Watch 2011)

Cognitive-behavioral treatments: A set of treatments that focus on modifying thinking, motivation, coping mechanisms, and/or choices made by people. (National Institute on Drug Abuse 2016)

Continuum of care: An integrated system of care that guides and tracks a person over time through a comprehensive array of health services appropriate to the individual’s need. A continuum of care may include prevention, early intervention, treatment, continuing care, and recovery support. (United States Office of the Surgeon General 2016)

Craving: Urgent, seemingly overpowering desire to use a substance, which often is associated with tension, anxiety, or other dysphoric, depressive, or negative affective states. (Substance Abuse and Mental Health Services Administration 2005)

Drug: A chemical compound or substance that can alter the structure and function of the body. Psychoactive drugs affect the function of the brain. (National Institute on Drug Abuse 2016)

Essential medicines: Essential medicines are intended to be available within the context of functioning health systems at all times, in adequate quantities, in the appropriate dosage forms, with assured quality and adequate information, and at a price the individual and community can afford. The WHO Model List of Essential Medicines (WHOML) is intended to be flexible and adaptable to many different situations; the precise definition of the medicines that are regarded as essential remains a national responsibility. (World Health Organization, Health Action International 2008)

Fentanyl: Pharmaceutical fentanyl is a synthetic opioid pain medication, approved for treating severe pain, typically advanced cancer pain. It is 50 to 100 times more potent than morphine. However, illegally made fentanyl is sold through illegal drug markets for its heroin-like effect, and it is often mixed with heroin and/or cocaine as a combination product. (Centers for Disease Control and Prevention 2017)

Harm reduction: In the context of alcohol and other drugs, harm reduction refers to policies or programs that focus directly on reducing the harm resulting from the use of alcohol or other drugs, both to the individual and the larger community. The term is used particularly for policies or programs that aim to reduce the harm without necessarily requiring abstinence. Some harm reduction strategies designed to achieve safer drug use may, however, precede subsequent efforts to achieve total abstinence. Examples of harm reduction include needle/syringe exchanges to reduce rates of needle-sharing among injecting drug users. (United Nations Office for Drug Control and Crime Prevention 2000)

Hepatitis C: Viral disease of the liver that is the leading cause of cirrhosis in the United States and a particular concern in medication-assisted treatment because of the high incidence of the disease and spread of the infection among people who inject drugs. (Substance Abuse and Mental Health Services Administration 2005)

Hospice: A specialist medical facility that provides palliative care. Hospices can be residential or outpatient facilities. (Human Rights Watch 2011)

Injection: Taking a substance into the skin, subcutaneous tissue, muscle, blood vessels, or body cavities—usually by means of a needle. (National Institute on Drug Abuse 2016)

Injection drug use: Taking drugs directly into blood vessels using a hypodermic needle and syringe. Also called intravenous drug use. (National Institute on Drug Abuse 2016)

Life-limiting illness: A broad range of conditions in which painful or distressing symptoms occur; although there may also be periods of healthy activity, there is usually at least a possibility of premature death. (Human Rights Watch 2011)

Medication-assisted treatment (MAT): Treatment for opioid use disorder combining the use of medications (methadone, buprenorphine, or naltrexone) with counseling and behavioral therapies. (Centers for Disease Control and Prevention 2017)

Methadone: The most frequently used opioid agonist medication. Methadone is a synthetic opioid that binds to “mu” opiate receptors and produces a range of mu agonist effects similar to those of short-acting opioids such as morphine and heroin. (Substance Abuse and Mental Health Services Administration 2005)

Morphine: A strong opioid medicine, the gold standard for treatment of moderate to severe pain. Morphine is considered an essential medicine by the World Health Organization in its injectable, tablet, and oral solution formulations. Oral solution mixed from morphine powder is the cheapest formulation. (Human Rights Watch 2011)

Naloxone: A prescription drug that can reverse the effects of opioid overdose and can be life-saving if administered in time. The drug is sold under the brand name Narcan® or Evzio®. (Centers for Disease Control and Prevention 2017)

Needle-sharing: The use of syringes or other injecting instruments (e.g. droppers) by more than one person, particularly as a method of administration of drugs. This confers the risk of transmission of viruses (such as human immunodeficiency virus and hepatitis B) and bacteria. Many interventions such as methadone maintenance and needle/syringe exchanges are designed partly or wholly to eliminate needle-sharing. (World Health Organization 1994)

Neonatal abstinence syndrome (NAS): NAS occurs when heroin from the mother passes through the placenta into the baby’s bloodstream during pregnancy, allowing the baby to become addicted along with the mother. NAS requires hospitalization and treatment with medication (often a morphine taper) to relieve symptoms until the baby adjusts to becoming opioid-free. (National Institute on Drug Abuse 2014)

Neuron (nerve cell): A unique type of cell found in the brain and throughout the body that specializes in the transmission and processing of information. (National Institute on Drug Abuse 2016)

Non-opioid therapy: Methods of managing chronic pain that does not involve opioids. These methods can include, but are not limited to, acetaminophen (Tylenol®) or ibuprofen (Advil®), cognitive behavioral therapy, physical therapy and exercise, medications for depression or for seizures, or interventional therapies (injections). (Centers for Disease Control and Prevention 2017)

Opiate: One of a group of alkaloids derived from the opium poppy (*Papaver somniferum*) with the ability to induce analgesia, euphoria and, in higher doses, stupor, coma, and respiratory depression. The term opiate excludes synthetic opioids.

Opioid: Natural or synthetic chemicals that interact with opioid receptors on nerve cells in the body and brain, and reduce the intensity of pain signals and feelings of pain. This class of drugs includes the illegal drug heroin, synthetic opioids such as fentanyl, and pain medications available legally by prescription, such as oxycodone, hydrocodone, codeine, morphine, and many others. Opioid pain medications are generally safe when taken for a short time and as prescribed by a doctor, but because they produce euphoria in addition to pain relief, they can be misused. (Centers for Disease Control and Prevention 2017)

Opioid dependence: Physical dependence experienced by a patient treated with opioids over time, such that withdrawal symptoms occur if the opioid is stopped abruptly. Physical dependence is treated by gradually reducing the opioid dose. It is distinct from addiction, a pattern of behaviors including compulsive use of drugs despite harm, which is uncommon in patients receiving opioid pain treatment. (Human Rights Watch 2011)

Opioid treatment program: In the U.S., a Substance Abuse and Mental Health Services Administration (SAMHSA)-sponsored program, usually comprising a facility, staff, administration, patients, and services, that engages in supervised assessment and treatment, using methadone, buprenorphine, or naltrexone, of individuals who have opioid use disorders. An OTP can exist in a number of settings, including but not limited to intensive outpatient, residential, and hospital settings. Services may include medically supervised withdrawal and/or maintenance treatment, along with various levels of medical, psychiatric, psychosocial, and other types of supportive care. (United States Office of the Surgeon General 2016)

Overdose: Injury to the body (poisoning) that happens when a drug is taken in excessive amounts. An overdose can be fatal or nonfatal. (Centers for Disease Control and Prevention 2017)

OxyContin®: Long-acting class II opioid drug usually obtained by prescription for treatment of pain. OxyContin is one of several prescription opioids increasingly obtained by illicit means and abused by people addicted to opioids. (Substance Abuse and Mental Health Services Administration 2005)

Pain management: Treatment of acute or chronic pain by various treatment methods, often including administration of opioid medications. (Substance Abuse and Mental Health Services Administration 2005)

Palliative care: Health care that aims to improve the quality of life of people facing life-limiting illnesses, through pain and symptom relief, and through psychosocial support for patients and their families. Palliative care can be delivered in tandem with curative treatment but its purpose is to care, not to cure. (Human Rights Watch 2011)

Prescription drug abuse: The use of a medication by someone other than for whom it is prescribed, in ways or amounts other than intended by a doctor, or for the experience or feeling it causes. (National Institute on Drug Abuse 2016)

Prescription drug monitoring programs (PDMPs): State-run electronic databases that track controlled substance prescriptions. PDMPs help providers identify patients at risk of opioid misuse, abuse and/or overdose due to overlapping prescriptions, high dosages, or co-prescribing of opioids with benzodiazepines. (Centers for Disease Control and Prevention 2017)

Primary healthcare facility: A medical facility that a patient will usually attend first in a non-emergency situation, such as a clinic or health care center. Many patients globally only have access to primary-level health care. (Human Rights Watch 2011)

Relapse: In drug addiction, relapse is the resumption of drug use after an attempt to stop taking it. Relapse is a common occurrence in many chronic disorders, including addiction, that require frequent behavioral and/or pharmacologic adjustments to be treated effectively. (National Institute on Drug Abuse 2016)

Stigma: Negative association attached to an activity or condition; a cause of shame or embarrassment. Stigma commonly is associated with opioid addiction and medication-assisted treatment. (Substance Abuse and Mental Health Services Administration 2005)

Substance use disorder: Maladaptive pattern of drug or alcohol use manifested by recurrent, significant adverse consequences related to the repeated use of these drugs or alcohol. The substance-related problem must have persisted and occurred repeatedly during a 12-month period. It can occur sporadically and mainly be associated with social or interpersonal problems, or it can occur regularly and be associated with medical and mental problems, often including tolerance and withdrawal. (Substance Abuse and Mental Health Services Administration 2005)

Tertiary hospital: A large hospital at the peak of a hierarchy of hospitals. A tertiary hospital provides all of the major medical services available in a country and admits patients referred from smaller hospitals that provide fewer services. (Human Rights Watch 2011)

Tolerance: Condition of needing increased amounts of an opioid to achieve intoxication or a desired effect; condition in which continued use of the same amount of a substance has a markedly diminished effect. (Substance Abuse and Mental Health Services Administration 2005)

Withdrawal syndrome (or withdrawal): Predictable constellation of signs and symptoms after abrupt discontinuation of or rapid decrease in use of a substance that has been used consistently for a period. Signs and symptoms of withdrawal are usually opposite to the direct pharmacological effects of a psychoactive substance. (Substance Abuse and Mental Health Services Administration 2005)

Wrap-around services: Wrap-around services are non-clinical services that facilitate patient engagement and retention in treatment as well as their ongoing recovery. This can include services to address patient needs related to transportation, employment, childcare, housing, legal and financial problems, among others. (United States Office of the Surgeon General 2016)

SOURCES

Although the terms included in this glossary have been selected from sources believed to be reliable, no warranty expressed or implied is made regarding accuracy, completeness, legality, reliability, timeliness, or usefulness of any information.

Appendix C: Glossary. Medication-Assisted Treatment for Opioid Addiction in Opioid Treatment Programs. Center for Substance Abuse Treatment. Substance Abuse and Mental Health Services Administration 2005. <https://www.ncbi.nlm.nih.gov/books/NBK64166>.

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