

CDC Issues New Guidelines for Opioid Painkiller Prescriptions

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In response to a significant increase in opioid overdose deaths, the ***U.S. Centers for Disease Control and Prevention (CDC)*** released new guidelines regarding prescriptions for opioid painkillers.

The CDC notes that an estimated 20 percent of patients presenting to physician offices with noncancer pain symptoms or pain-related diagnoses receive an opioid prescription. Opioid prescriptions per capita increased 7.3 percent from 2007 to 2012, with the rates increasing more for family practice, general practice and internal medicine, as compared with other specialties. Prescriptions by primary care clinicians account for nearly half of all dispensed opioid prescriptions.

The CDC articulates three principles for improving patient care:

- Nonopioid therapy is preferred for chronic pain outside of active cancer, palliative, and end-of-life care.
- When opioids are used, the lowest possible effective dosage should be prescribed to reduce risks of opioid use disorder and overdose.
- Providers should always exercise caution when prescribing opioids and monitor all patients closely.

The guidelines, which are voluntary, provide recommendations for the prescribing of opioid pain medications by primary care physicians for chronic pain in outpatient settings outside of active cancer treatment, palliative care, and end-of-life care. They address three general issues: (1) determining when to initiate or continue opioids for chronic pain; (2) opioid selection, dosage, duration, follow-up and discontinuation; and (3) assessing risk and addressing harms of opioid use. Generally, the guidelines suggest that primary care providers treating adults with chronic pain consider alternatives, limit treatment length and monitor their patients actively.

The recommendations urge active patient monitoring via use of state prescription drug monitoring

program (PDMP) data. PDMPs, which are currently employed in every state except Missouri, are designed to give visibility to patients' prescription history, so as to avoid situations where a patient receives multiple prescriptions from different doctors. Physicians are also encouraged to use urine drug testing before starting opioid therapy and to consider using it at least annually thereafter as a patient monitoring tool.

The CDC's guidelines are part of a broad-based call to action regarding opioid abuse. Just yesterday, [Massachusetts adopted comprehensive legislation to curb opioid abuse](#). In the last few years, the U.S. Food and Drug Administration (FDA) has considered a wide range of measures to address opioid abuse, and the U.S. Drug Enforcement Administration has also taken a range of actions, including substantially enhanced restrictions on hydrocodone combination products which became effective in 2014.

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