

Opioid cases: Debate



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Case #1

- A 47 year old WM w/ htn, DM and symptomatic CAD
- Attacks of severe & at times disabling migraine headache 2 to 3 times per month
- The headache is present upon awakening, typically severe already at that point
- In the past unresponsive to oral NSAIDs, tramadol, oral dopamine antagonists and self-administered IM ketorolac
- In the past oral oxycodone/APAP has been effective in treating these headaches and has caused no obvious side effects
- He would like a prescription for #5 tablets of this compound monthly

Would you write him this prescription? Yes/No

Case #2

- A 48 year old female presents with chronic daily headache/chronic migraine
- Her headaches have been occurring daily for 2 years, and she is functionally incapacitated by head pain on an average of 8-10 days per month
- She does not overuse symptomatic medication
- She has no active mood disorder and sleeps reasonably well
- She has failed adequate trials of prophylactic rx with topiramate, divalproex sodium, gabapentin, zonisamide, propranolol, amitriptyline and tizanidine, as well as onabotA (x3) and occipital nerve blocks
- She tells you that treatment with methadone 2.5mg TID has resulted in a significant reduction in her migraine burden and that she is tolerating the drug well

Would you recommend this patient continue on methadone? Yes/No