EXTENDED-RELEASE OPIOIDS FOR SEVERE CHRONIC PAIN

POINT-COUNTERPOINT DEBATE

To view this 1-hour activity, please [click here](#) or enter the following url into your browser: [www.pharmacomgroup.com/eropioid/player.html](http://www.pharmacomgroup.com/eropioid/player.html)

TARGET AUDIENCE
Health care providers who prescribe opioid analgesics.

PROGRAM DESCRIPTION
It is agreed by most clinicians that the balance of benefit:risk for extended-release and long-acting (ER/LA) opioids varies depending on the individual patient. However, where the balance lies in favor of prescribing these medications versus not prescribing them is currently not clear. To address risks associated with ER/LA opioids, the FDA has recently taken several actions: requiring a single-system Risk Evaluation and Mitigation Strategy (REMS); making class-wide safety labeling changes to convey the risks associated with ER/LA opioids and the population in whom these drugs should be used; and requiring postmarketing studies. However, there is debate about whether ER/LA opioid label changes should be more extensive and whether ER/LA opioids should have abuse-deterrent properties for all chronic pain patients. While some experts argue that ER/LA opioids without abuse-deterrent features should not be approved, others contend that there is a medical need for new opioid formulations for carefully selected patients with pain severe enough to require daily, around-the-clock, long-term opioid treatment and for which alternative treatment options are inadequate.

A point-counterpoint debate with two pain management experts will shed light on recent controversies around ER/LA opioids.

LEARNING OBJECTIVES
After viewing the archive, participants should be better able to:
1. Critique the rationale for new labeling changes for ER/LA opioids
2. Appraise the arguments for and against the introduction and use of ER/LA opioid products that do not have abuse-deterrent features
3. Judge the need for further restrictions of ER/LA opioids balanced against the need for access to these medications for severe chronic pain

MODERATOR
Bradley S. Galer, MD
Executive Vice President and Chief Medical Officer
Zogenix Inc.
San Diego, California

FACULTY
Christopher G. Gharibo, MD
Associate Professor of Anesthesiology and Orthopedics
NYU School of Medicine
Medical Director of Pain Medicine
Department of Anesthesiology
NYU-Hospital for Joint Diseases
New York, New York

Peter S. Staats, MD, MBA
Managing Partner
Premier Pain Centers
Shrewsbury, New Jersey
Adjunct Associate Professor Anesthesiology and Critical Care Medicine
Johns Hopkins University School of Medicine
Baltimore, Maryland

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