

Pain Medication Might Cause More Pain

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It might sound strange to you that pain medication might cause more pain, but it is true. One example is that morphine or its derivative can lead to more abdominal pain in patients with sphincter of oddi dysfunction. Another more common example is nonsteroidal anti-inflammatory drugs (NSAIDs) such as Ibuprofen or Aleve, which can cause deep disabling stomach pain.

A lot of people take over-the-counter pain medication like NSAIDs for back pain, headache, joint pain or abdominal pain. Usually it helps with pain if used for short period of time at low to moderate dose. More often than not, the prolonged use of these NSAIDs at high dose will lead to refractory persistent upper abdominal pain radiating to the back, which could become very difficult to control. Upper GI endoscopy usually reveals extensive chemical gastropathy and deep gastric ulcer. The mechanism of NSAIDs causing such stomach injury is multifactorial especially impaired mucosal defense mechanism.

Another relatively uncommon example is morphine causing more abdominal pain in patients with sphincter of oddi dysfunction. Morphine or its derivatives can lead to strong sphincter muscle contraction especially at sphincter of oddi. Patient with sphincter of oddi dysfunction usually complains of more abdominal cramping pain with nausea and vomiting after given morphine. These patients would say they are “allergic” to morphine. Sphincter of oddi dysfunction is seen more often in patients with gallbladder removal for dysfunctional gallbladder. If you develop more abdominal pain after taking NSAIDs or morphine, please contact Dr. Jeff Ye, North Atlanta Medical & Digestive Care at 770-346-0900. We can help!