The Effect of Opioid Therapy on Endocrine Function (TH311)

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Objectives
- Discuss screening for opioid-induced endocrine symptoms in palliative care patients.
- Manage opioid-induced endocrinopathies in the context of patients’ goals of care for pain and symptom management.
- Discuss how to refer patients appropriately to an endocrinologist for opioid-induced endocrine side effects.

The symptoms of opioid-induced endocrinopathies are usually overlooked, because they are gradual and subtle. They tend to overlap with the physical and mood-related symptoms of pain disorders and often go unrecognized. As palliative care clinicians increasingly care for patients earlier in their disease trajectory, the prevalence of these endocrinopathies will increase in our patient population as they live longer. Opioids have well-documented effects on both the hypothalamic-pituitary-gonadal axis and the hypothalamic-pituitary-adrenal axis. These effects are confounded by illnesses and drugs outside the opioid class. Because these side effects may interfere with successful pain management and decrease the quality of the patient’s life, palliative care clinicians need to develop awareness, expertise, and, ultimately, standards of care for use in their patient care practices.

This interactive session will review the literature and evidence base for the endocrine effects of opioids. Using case presentations, an interdisciplinary team will discuss the practical aspects of the management of these side effects. This team will consist of a palliative medicine physician, a palliative care pharmacist, and an endocrinologist. The session will discuss a realistic approach for clinical symptom screening, appropriate laboratory evaluation, and differential diagnosis, including evaluating the contribution from concomitant nonopioid pharmacotherapy. Finally, although national guidelines have not been established for monitoring and treating hypogonadism or hypoadrenalism induced by opioids, this session will outline general treatment principles for use in palliative care.