



Understanding Signs and Symptoms of Opioid Use Disorder

UNDERSTANDING
ADDICTION



SIGNS AND
SYMPTOMS



UNCONTROLLED
PAIN



GETTING
HELP



Partnering for Better Chronic Pain Management and Safer Opioid Use: A Knowledge Hub for People With Disability and Their Providers

Introduction | Opioid use disorder, or opioid addiction, is a chronic brain condition that can happen to anyone. It's not possible to predict who will develop opioid use disorder and who won't. Many people with opioid use disorder keep working and doing daily activities. Understanding the signs and symptoms can help people identify a problem and get help.

The four **C**s occur with opioid use disorder

1. **Craving opioids:** A strong physical desire to use opioids.
2. **Compulsive use of opioids:** A strong urge to fuel the craving. The person using opioids grows anxious about being able to get opioids. This anxiety affects all parts of their life.
3. **Decreased Control over opioid use:** An inability to cut down on opioids or to stop using them. This happens even if there is a desire to stop using them. In severe cases, the person lacks control over how often to take these drugs or how many to take.
4. **Continued use despite harm:** Using opioids despite harmful outcomes like problems with money, work, personal relationships, and the law.

People and their family members should be concerned when certain behaviors happen because of opioid use. The table below shows examples of these behaviors. Having one behavior may not be a problem, but having **a pattern of several behaviors** that keep happening suggests a problem with opioid use. To diagnose opioid use disorder, your provider will look for evidence of these behaviors.

Examples of Concerning Behaviors Associated With Opioid Use Disorder

Behaviors	Patterns of Behavior to Look For
Using more opioids than prescribed	<ul style="list-style-type: none"> ■ Taking opioids more often or at higher doses than prescribed ■ Running out of medication early ■ Losing prescriptions or pill bottles ■ Often asking for early refills
Getting opioids from multiple sources	<ul style="list-style-type: none"> ■ Taking prescription medicines from friends or family ■ “Doctor shopping” (going from one provider to another) for opioids
Making many requests to increase opioid dose	<ul style="list-style-type: none"> ■ Constantly asking for higher opioid doses
Missing appointments and other commitments because of opioid use	<ul style="list-style-type: none"> ■ Not completing usual tasks at home or work ■ Being too tired or too sick from opioid use to get things done ■ Missing deadlines or appointments regularly
Less participation in physical or social activities because of opioid use	<ul style="list-style-type: none"> ■ Appearing overly sleepy or intoxicated ■ Not participating in usual fun activities or physical activities like taking walks ■ Not engaging in social activities with friends and family as usual ■ Having multiple accidents (falls, car crashes, etc.)
Messy appearance because of opioid use	<ul style="list-style-type: none"> ■ Not bathing, changing clothes, or taking care of other personal hygiene needs
Aggressive behavior because of opioid use	<ul style="list-style-type: none"> ■ Having outbursts of anger, rude behavior, or demanding behavior when confronted about opioid use
Taking opioids for symptoms other than pain or taking illegal drugs	<ul style="list-style-type: none"> ■ Regularly taking opioids to manage anxiety or depression or to sleep ■ Taking opioids for a feeling of intense excitement, called a “high”
Uncontrolled use of other substances in addition to prescribed opioids	<ul style="list-style-type: none"> ■ Regularly taking more prescription medicines than prescribed ■ Regular use of illegal drugs like cocaine or stimulants ■ Buying illegal drugs or prescription medicines on the street ■ Drinking alcohol regularly in amounts to get drunk or high, or to prevent alcohol withdrawal symptoms

Certain physical changes happen to everyone taking opioids

Sometimes, people confuse opioid use disorder with physical changes that happen when someone takes opioids for a while. These changes are called *physical opioid dependence* and *opioid tolerance*. People with opioid use disorder often develop dependence and tolerance. These are natural responses as the body gets used to opioids. If someone does not have the four Cs or any of the concerning behaviors described earlier, they do not have opioid use disorder.

Physical opioid dependence. Physical dependence happens as the brain adjusts to opioids. Over time, the body expects opioids to be present. If a person stops taking opioids suddenly or starts taking a much lower amount, they may go into withdrawal. Examples of withdrawal symptoms include muscle cramps, chills, poor sleep, nausea, vomiting, diarrhea, and anxiety.

Opioid tolerance. Tolerance occurs when the brain gets used to opioids. Over time, a person needs higher doses of opioids to get the same effect. Becoming tolerant does not mean someone has opioid use disorder. But higher doses of opioids do increase the risk of developing opioid use disorder. Higher doses also increase the risk of slow and shallow breathing. Slow and shallow breathing lowers oxygen levels in the body. This can be dangerous. Always take opioids as prescribed by your provider.

To prevent withdrawal symptoms, opioids should never be stopped suddenly. If you want to stop taking opioids, talk with your provider about how to taper your opioid dose. When a provider tapers your opioid dose, they reduce it by small amounts every 1 to 2 weeks. Tapering will help prevent withdrawal symptoms.

Taking opioids in ways other than prescribed may suggest poor pain control

Sometimes, people may take opioids differently than prescribed. Or they may ask for early refills because their pain is not well controlled. If your pain is hard to manage, talk with your provider. Your provider can help you find other ways to manage pain.

See these resources in the *Knowledge Hub* for ideas on ways you can manage chronic pain and other treatment options:

- [Moving From the Cycle of Pain to the Cycle of Wellness](#)
- [Developing a Plan for Self-Management of Pain](#)
- [Methods for Managing Chronic Pain Other Than Medication](#)

What to do if a person or family member is concerned about opioid use disorder

If you have concerns about opioid use, contact your provider or the National Helpline of the Substance Abuse and Mental Health Services Administration (SAMHSA). The contact number is 1-800-662-HELP (4357). The helpline is a free, confidential service. For information about the helpline, go to <https://www.samhsa.gov/find-help/national-helpline>.

See these resources in the *Knowledge Hub* for opioid use disorder treatment information:

- [How Opioid Use Disorder Is Treated](#)
- [Answers to Common Questions About Accessing Opioid Use Disorder Treatment](#)



For more information visit: Partnering for Better Chronic Pain Management and Safer Opioid Use: A Knowledge Hub for People With Disability and Their Providers | KnowledgeHub.air.org

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