New York State Medicaid Drug Information Response Center





In a patient who is tolerant to the analgesic effects on one pure opioid agonist, is there any clinical evidence in the literature that switching to a different pure opioid agonist in the short-term and then returning to the original opioid agonist will result in renewed efficacy without the tolerance?

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Opioid rotation or switching is a common practice used in patients to improve clinical outcomes when an opioid is ineffective despite dose increases or causes intolerable side effects.¹⁻⁷ Although this practice is widespread, evidence regarding its use is low-quality or lacking.^{1-6,8} While numerous studies examined the efficacy and safety of switching from 1 opioid to another, no literature was identified involving patients switching back to the original opioid after opioid rotation. Based on this literature review, no clinical evidence was identified at this time to support this specific type of opioid rotation.

References:

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