**The Relationship between Higher Chronic Opioid Therapy Dose and Specific Personality Traits in Individuals with Chronic Pain**

McIntyre A, Mehta S, Vanderlaan D, Sequeira K, Loh E, Teasell R. The Relationship between Higher Chronic Opioid Therapy Dose and Specific Personality Traits in Individuals with Chronic Pain. Pain Research and Management Volume 2021, Article ID 9946067, 9 pages

https://doi.org/10.1155/2021/9946067.

This study examined the relationship between opioid use and specific personality traits among individuals with chronic pain stratified by morphine equivalent doses (MEQ). Despite management with recommended nonpharmacologic and pharmacologic treatments, many individuals with chronic pain struggle to try to reestablish their premorbid level of activity and productivity. Individuals in these circumstances may experience high levels of stress and dysphoria when faced with pain-related limitations and may more aggressively pursue treatment for unrelenting chronic pain including opioids. We were interested in whether the same personality factors (anxiety sensitivity and experiential avoidance) that significantly influenced chronic pain disability and mood are also related to opioid analgesic dosage. Therefore, the purpose was to evaluate the relationship between opioid dosage and these same problematic personality traits as well as psychosocial variables among individuals with chronic pain stratified by morphine equivalent doses (i.e., 0 mg, 1–89 mg, and 90+ mg MEQ).

215 individuals (64.2% female) were recruited from a chronic pain clinic with a mean age of 52.7 ± 11.7 years and time since pain onset of 14.1 ± 10.2 years (range 1–45). After controlling for gender, time since pain onset, and average pain severity, patients with MEQ 90+ mg had significantly higher scores for experiential avoidance and anxiety sensitivity in addition to reports of increased pain interference, greater depressive and anxiety symptoms, more dysfunctional coping, and poorer QoL than those with MEQ 1–89 mg or MEQ 0 mg. These maladaptive personality traits may help to explain why and how individuals with chronic pain utilize higher doses of opioid analgesics in that these individuals have trouble coping, not so much with the pain intensity, but rather with how the pain is interfering with their lives, i.e. slowing them down and interfering with goals and tasks. It should come as no surprise that narcotic analgesics are more likely to be used in a higher dose in an attempt to overcome the pain and reestablish a more “normal” lifestyle; these are patients who are going to have trouble coping, experience greater pain interference, a perception of lower quality of life and higher levels of anxiety and depression with chronic pain.