It’s a fact: women experience pain differently than men. They also respond to opioids differently. These differences can seriously impact the likelihood that women become addicted to opioids.

There are differences between women and men in all health conditions. Women are more likely to have certain conditions, such as arthritis, that can cause pain. They are more likely to suffer injuries, including injuries sustained during a domestic incident. As a result, women deal with pain — episodic, acute, and chronic — more frequently than men.

Research also tells us that women tend to experience pain more intensely than men. We used to think that was because it was more acceptable for women to complain about pain; however, it is more complex than that— a woman’s body perceives pain differently. This could be related to genetics or to physiological differences such as effects of sex hormones on pain sensitivity, or other factors.

To demonstrate this, a 2012 Stanford study assessed pain scores from more than 11,000 patients treated between 2007 and 2010. The researchers evaluated sex differences in reported pain for 47 diagnoses. The results showed that women reported average pain scores that were 20 percent higher than men’s scores.
Because women tend to be disproportionately affected and impacted by pain, women may be more likely to access treatment, such as opioids. Unfortunately, women’s bodies respond to opioids differently than do men’s, and women are more likely to become addicted with smaller doses over shorter periods of time. This can have tragic — and, in the worst circumstances, even fatal — implications.

The operating room has become an unintended gateway to possible opioid addiction, as nearly every patient undergoing surgery in the United States gets a prescription for opioids. In 2016 alone, nearly 3 million Americans who had a surgical procedure became persistent users, meaning they continued taking opioids three to six months after their operation. Of this, nearly 70 percent, or some 2 million Americans, were women.

To address this challenge, we must take steps to help patients (and women in particular) head off addiction before it starts, while managing their pain in a safe and effective manner. There are already FDA-approved non-addictive, non-opioid medications for the treatment of postsurgical pain. Accordingly, use of non-opioid medications could both prevent unnecessary exposure to opioids in the surgical setting and reduce the number of pills in medicine cabinets from partially used prescriptions.

Physicians are at the forefront of this challenge and many are already taking steps to help patients manage their pain without opioids. As a result, the number of opioid prescriptions written has dropped dramatically over the past several years.

Appropriate management of pain requires a conversation between the patient and the health care provider, to determine what modality would be best. To do this effectively, women need to be educated about non-opioid therapies and have access to them. In a recent Morning Consult survey of over 1000 women nationwide, ages 22 to 59, of respondents who reported they or a family or household member were prescribed an opioid, only 34 percent said they or the family member were informed of non-opioid pain management alternatives before receiving the prescription for an opioid.

This is a trend that must change. Women should be encouraged to speak to their doctors about pain management strategies, including whether to use an opioid or a non-opioid medication and whether other pain management strategies, such as physical therapy or biofeedback, would be useful.
We can help curb the opioid epidemic, improve patient outcomes and save health system resources. To improve the health and function of women, the American Medical Women’s Association wants to ensure that patients and their health care providers understand that sex differences in pain perception and response to opioids place women at greater risk of opioid addiction.

We want to make sure that women — and all Americans — have access to appropriate strategies to manage pain and improve their ability to perform their daily activities. This will lead to less opioid use, lower rates of addiction and a healthier nation.

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