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The FDA's New Rules for Painkillers

By [Valerie Ross](#)

Tighter restrictions on drugs like Vicodin and Lortab means many people with pain management issues may have to turn to alternative therapies.

Late last month, [the FDA proposed tighter restrictions on drugs that contain hydrocodone](#), the most commonly prescribed opiod painkiller &ndash and most common prescription medication, period. The change would, as far as the FDA is concerned, put hydrocodone-based drugs such as Vicodin and Lortab in the same category as painkillers like morphine and oxycodone.

Fears about addiction and overdose drove the shift: The number of [opiod-related deaths has exploded](#) in the past decade, and the thinking goes that making the drugs harder to access will make them less likely to be abused.

Changing the FDA classification of hydrocodone drugs (from Schedule III to the more stringent Schedule II) will keep pills out of the wrong hands, it is hoped, but it will come with hassles for patients, too, especially those with arthritis, multiple sclerosis, and other conditions that require long-term pain management. "Patients in pain are going to have a more difficult time accessing it and it will cost them more money," says Dr. Lynn Webster, president of the American Academy of Pain Medicine. Patients will only be able to get a prescription for 90 days at a time of a hydrocodone-based drug. Neither initial prescriptions nor refills can be called in (as they can now), meaning more time and money spent on trips to the doctor.

Simply switching over to another painkiller might sound like an easy solution, but hydrocodone isn't the only one to come with significant risks, adds Webster. Methadone, while as restricted as hydrocodone-based drugs now are, is usually given for less time, often translating to less effort and expense – but it's also the drug most associated with opiod deaths. Even NSAIDs – acetaminophen, ibuprofen, and other anti-inflammatory painkillers – come with risks of GI bleeds, heart attack, stroke, and other serious side effects, especially at higher doses or taken over long periods.

It's best to look for alternatives to medication whenever you can, Webster says. Acupuncture, exercise, and weight reduction can all help in some cases. If those don't work, talk to your doctor about what medication is best for your individual case – and be prepared for it to be harder, and more expensive, to access than it would have been.