



# Opioids and Pain in Youth:

## A toolkit for health professionals

**This toolkit shares evidence-based solutions to help you and your patients.**

Whether safely prescribing opioids, exploring alternative therapies,  
or providing informed education, your efforts matter!

**#ItDoesntHaveToHurt**



## Acknowledgements

**This toolkit is a product of the collective expertise of (in alphabetical order):**

Samina Ali, MD, FRCPC  
Kathryn Birnie, PhD, RPsych  
Raad Fadaak, PhD  
Elise Kammerer, DPHIL, MPH, MA  
Megan MacNeil, MPH  
Catherine Riddell, BASc  
Louise Tunnah, PhD



***The National Advisory Group for SKIP's 'Youth in Pain: Solutions for effective opioid use' project.***

This diverse group of patient and caregiver partners, health professionals, and policymakers provided invaluable guidance and expertise in the creation of this toolkit. In particular, we thank the following individuals (ordered alphabetically) for their additional time spent reviewing and providing feedback on the toolkit:

Dr. Marie-Joëlle Doré-Bergeron (MD, FRCPC, Paediatrician)  
Dr. Melissa Pielech (PhD; pediatric psychologist; youth substance use and pain specialist)  
Rosalind Robertson (Canadian Centre on Substance Use and Addiction (CCSA) representative and a Patient Partner)  
Dr. Astha Shah (BDS, MSc, FRCDC; Public Health Dentist)  
Ariana Kubelik (Patient Partner)  
Natalie del Signore (Parent Partner)  
A youth patient partner

***In addition, SKIP would like to thank the following individuals for their thoughtful contributions:***

Dr. Fiona Campbell (BSc, MD, FRCA, Director, Chronic Pain Program, Anesthesia & Pain Medicine Co-director, SK Pain Centre, The Hospital for Sick Children, SKIP Hub Lead)  
Solutions for Kids in Pain Hub Leads, Knowledge Brokers, and Admin Centre staff  
Justin Bonhomme (RKin, MHK, Partnering for Pain Lab)  
Kari Tiffin (Bright by Design Inc.)

*Suggested Citation (APA Citation Style):*

*Solutions for Kids in Pain. (2023). Opioids and Pain in Youth: A toolkit for health professionals. <https://www.kidsinpain.ca/youth-in-pain>*

Scan here! For additional information,  
tools, and to provide feedback on  
the effectiveness of this resource.

[linktr.ee/youthinpain](https://linktr.ee/youthinpain)





Opioids and Pain in Youth: A toolkit for health professionals

# Acute Dental Pain

## Overview

When a child or youth needs dental treatment, they may sometimes require opioids afterwards. When 60-95% of opioids prescribed to children and youth for pain related to a dental procedure remain unused\*, this creates a large amount of medication available for potential non-indicated usage.

\*Dyson et al. 2022. <https://doi.org/10.1002/emp2.12822>

Dentists have an opportunity to reduce non-indicated opioid use by decreasing the quantity of opioids they prescribe. Dental treatment-related pain should be managed with non-opioid analgesia whenever possible. When needed for moderate to severe dental pain, judicious use of opioids can help reduce children's discomfort, improve their satisfaction with care, and prevent long-term negative consequences of untreated pain.

This toolkit section includes resources for safer and responsible prescribing and administering opioids for acute dental pain in children and youth.

**When opioids are prescribed and administered for acute dental pain, there are several considerations to ensure safer therapeutic use:**

- **Physical** (e.g., salt water rinses, cold drinks) **and psychological** (e.g., distraction) treatments should be used for all children and youth with acute dental pain
- **Non-opioid medications** (e.g., acetaminophen, ibuprofen, other NSAIDs) should be used as first-line pharmacologic therapies
- **Ibuprofen and acetaminophen can be combined for relief of moderate pain**; this combination provides relief similar to many oral opioid medications, without opioid side effects, and may alleviate the need to prescribe opioids
- **Opioids should be combined with a non-opioid medication** to reduce the total amount of opioid needed and lessen the occurrence of adverse events
- **Three days (or 5-10 doses) of an oral opioid medication** is almost always enough to manage acute dental pain at home
- **Indicate the quantity of opioid doses** on the prescription, and note "no refills"
- **Children and their families should always be counselled** about the potential side effects of opioid medications
- **Opioid risk assessment should be performed for all families** receiving a prescription for opioids, using a validated risk assessment tool

**Opioids should be prescribed and administered in a culturally safe way.**

**Also consider risks for opioid use disorder, higher-risk opioid use, child age, and pre-existing mental health diagnoses.**

However, even when these risks are present, **children with severe pain have the right to adequate pain management, which may include the use of opioids.**

Children and their families should share the decision-making about whether opioid analgesia is appropriate for them with their healthcare provider.

“The dental profession recognizes the importance of proper pain management for oral health issues. But we also recognize the debilitating impact that higher-risk use of analgesics such as opioids can have on individuals, families, society, and healthcare systems. Oral healthcare providers have an obligation to ensure appropriate pain management for their patients, while at the same time reduce opioid prescriptions in their practice through a focus on preventative care, multimodal pain relief strategies, effective and timely interventions, and the use of non-opioid analgesics.”

~ Public Health Dentist



## Statements and Guidelines

### **Analgesics for Surgical Third Molar Extraction: Clinical Effectiveness and Guidelines**

Seal K & Wright M-D. CADTH Rapid Response Report: Summary of Abstracts. 2018

[View clinical guidelines](#)

## Health Professional Resources

### **Evidence-based clinical practice guideline for the pharmacologic management of acute dental pain in children.** Carrasco-Labra, et al. The Journal of American Dental Association. 2023

Provides evidence-based guidelines for oral healthcare providers for the management of acute dental pain in children under 12 years of age following the extraction of 1 or more teeth (simple and surgical) and the temporary management of toothache when treatment is not immediately available.

[Access article](#)

### **Pain Management in Infants, Children, Adolescents, and Individuals with Special Health Care Needs**

American Academy of Pediatric Dentistry, The Reference Manual of Pediatric Dentistry. 2022  
This statement provides current best practices for pediatric pain management resulting from dental/orofacial injury, infection, and dental procedures.

[View PDF](#)

### **Opioids and Children and Adolescents: Information for Oral Health Professionals**

Barzel R & Holt K. National Maternal and Child Oral Health Resource Center. 2022

This resource provides information on recent research, best practice and tips for managing acute oral pain.

[View PDF](#)

### **Pain Relief without Opioids. Teens, wisdom teeth, and opioids**

Canadian Dental Association. CDA Essentials. 2017  
Provides information for health professionals on the safe and effective use of opioids following third molar surgery.

[Access article](#)

## Youth and Family Resources

### **Managing pain after wisdom teeth removal: your questions answered**

ISMP. 2019

Answers to common questions related to managing and monitoring pain after wisdom teeth removal.

[View PDF](#)

## Additional Resources

### **Chairside Pain and Management Discussion: Acute Pain and Opioid Prescriptions**

American Dental Association, Chairside Pain Management Discussion. 2022

[View PDF](#)

### **First Use Non Opioids!**

Ontario Pharmacy Evidence Network. Summit. 2021

[Watch video](#)

## References:

### Acute Dental Pain

American Academy of Pediatric Dentistry. (2022). Pain management in infants, children, adolescents, and individuals with special health care needs (The Reference Manual of Pediatric Dentistry, p. 392.400). American Academy of Pediatric Dentistry. [https://www.aapd.org/media/Policies\\_Guidelines/BP\\_Pain.pdf](https://www.aapd.org/media/Policies_Guidelines/BP_Pain.pdf)

Benzel, R., & Holt, K. (2022). Opioids and children and adolescents: Information for oral health professionals. National Maternal and Child Oral Health Resource Center, Georgetown University. [https://www.mchoralhealth.org/PDFs/opioids\\_children\\_adolescents.pdf](https://www.mchoralhealth.org/PDFs/opioids_children_adolescents.pdf)

Canadian Dental Association, & Donaldson, M. (2017). Pain relief without opioids: Teens, wisdom teeth, and opioids. CDA Essentials, 4(7), 21. <https://www.cda-adc.ca/en/services/essentials/2017/issue7/19/>

Carrasco-Labra, A., Polk, D. E., Urquhart, O., Aghaloo, T., Claytor, J. W., Jr, Dhar, V., Dionne, R. A., Espinoza, L., Gordon, S. M., Hersh, E. V., Law, A. S., Li, B. S.-K., Schwartz, P. J., Suda, K. J., Turturro, M. A., Wright, M. L., Dawson, T., Miroshnychenko, A., Pahlke, S., ... Moore, P. A. (2023). Evidence-based clinical practice guideline for the pharmacologic management of acute dental pain in children: A report from the American Dental Association Science and Research Institute, the University of Pittsburgh School of Dental Medicine, and the Center for Integrative Global Oral Health at the University of Pennsylvania. The Journal of the American Dental Association, 154(9), 814-825.e2. <https://doi.org/10.1016/j.adaj.2023.06.014>

Institute for Safe Medication Practices Canada. (2019). Managing pain after wisdom teeth removal: Your questions answered. Institute for Safe Medication Practices Canada. <https://www.ismp-canada.org/download/OpioidStewardship/WisdomTeethRemoval-EN.pdf>

Seal, K., & Wright, M.-D. (2018). Analgesics for surgical third molar extraction: Clinical effectiveness and guidelines (Summary of Abstracts RB1209-000; pp. 1–15). Canadian Agency for Drugs and Technologies in Health. <https://www.cadth.ca/sites/default/files/pdf/htis/2018/RB1209%20Analgesics%20for%20Oral%20Surgery%20Final.pdf>

### Acute Dental Pain - additional

American Dental Association. (2022). Chairside pain management discussion acute pain and opioid prescriptions (Chairside Pain Management Discussion). American Dental Association. [https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/resources/practice/health-and-wellness/ada\\_chairside\\_pain\\_management\\_discussion.pdf?rev=b72ea26d3a434bd590a0e321f07e9904&hash=B496A3F1062EFCAE52707FB8E662694A](https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/resources/practice/health-and-wellness/ada_chairside_pain_management_discussion.pdf?rev=b72ea26d3a434bd590a0e321f07e9904&hash=B496A3F1062EFCAE52707FB8E662694A)

Canadian Dental Association. (2023). Pain management. [http://www.cda-adc.ca/en/oral\\_health/talk/complications/pain\\_management/](http://www.cda-adc.ca/en/oral_health/talk/complications/pain_management/)

*Opioids and Pain in Youth: A toolkit for health professionals / References*

Dyson, M. P., Dong, K., Sevcik, W., Graham, S. Z., Saba, S., Hartling, L., & Ali, S. (2022). Quantifying unused opioids following emergency and ambulatory care: A systematic review and meta-analysis. Journal of the American College of Emergency Physicians Open, 3(5), e12822. <https://doi.org/10.1002/emp2.12822>

Ontario Pharmacy Evidence Network. (2021, March 11). First Use Non Opioids! OPEN Summit 2021. <https://www.youtube.com/watch?v=LVvEnMW3n7M>