What you need to know:

Your health and opioids



Types of opioids

- Prescription medications (such as hydromorphone or oxycodone)
- Unregulated opioids (street drugs such as heroin or non-prescribed fentanyl)
- Opioid substitutes used for treatment of opioid dependence (such as methadone or buprenorphine)

13% of Canadian
women use
prescription opioids



Using opioids, whether they are prescription medications or unregulated street drugs, can cause serious harms to your health, including dependence, overdose, and death

Mental health and trauma

Opioid use is strongly associated with mental illness and past trauma

Individuals who use opioids should not be stigmatized

Comprehensive treatment and support are available to help manage all aspects of your health

Sexual health

Long-term opioid use can lower sexual desire and response

Using opioids, like other substances, can lead to risky sexual behaviour, including unprotected sex, and increase the risk of sexually transmitted infections and unintended pregnancy

Chronic pelvic pain

Chronic pelvic pain (such as that caused by endometriosis) is the most common reason for opioid prescription

Women with endometriosis have a significantly greater risk of long-term opioid use, dependence, and overdose



60% of women with endometriosis have significant chronic pain

Contraception

There is no evidence that opioids affect the safety and effectiveness of hormonal contraception

For women who use opioids,
long-acting reversible
contraceptives that do not
need repeated
administration, such as an
intrauterine device (IUD) or
birth control implant, are
recommended

Fertility

Opioids decrease the levels of hormones involved in reproduction, which can cause abnormal periods and early menopause

Long-term opioid use negatively affects fertility and may cause infertility

Pregnancy



Using opioids during pregnancy can harm both you and your baby, but there are safe, effective treatment options available to help manage use during pregnancy. Speak to a health care provider to learn more about treatment options and to make a plan to help keep you and your baby safe

Quitting or "detoxing" on your own during pregnancy is not recommended, as it may be harmful for you and your baby

In Canada, an estimated 1.1% to 1.4% of pregnant women said they use opioids



Birth outcomes

Opioids travel across the placenta to the baby. So babies exposed to opioids during pregnancy may have temporary withdrawal symptoms after birth

Not all babies will experience withdrawal symptoms, and symptoms are treatable

Swaddling, breastfeeding, and skin-to-skin contact can help make babies feel better

Breastfeeding



Breastfeeding and skinto-skin contact are encouraged for most women taking opioids and can help improve withdrawal symptoms in babies after birth

If you are using unregulated opioids (street drugs such as heroin), it is safest not to breastfeed because of a high risk of contamination in these drugs

Menopause

There is no evidence that opioids can help manage menopausal symptoms, including hot flashes, night sweats, and vaginal dryness

Long-term opioid use can produce symptoms similar to menopause and may complicate how actual symptoms of menopause are managed



In Canada, 12.2% of people aged 65 and older are using prescription opioids

Older women (65 years and older)



The risk of adverse effects due to opioids is greater in women aged 65 years and older

Long-term opioid use can affect bone health, increasing the risk of osteoporosis and leading to more falls and fractures in older women

To learn more about how opioids affect your health visit the SOGC at:







sexandu.ca

yourperiod.ca

menopauseandu.ca