

Codeine (addictology)

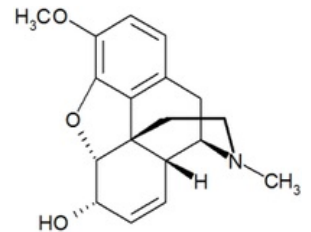
Codeine is a natural **opiate** found in the resin of the poppy (*Papaver somniferum*). It is mainly used as an antitussive and analgesic. It also has significant habit potential and is abused as a drug for its euphoric effects.

Effects

Codeine **suppresses pain** of mild to moderate intensity and **increases the threshold for the cough reflex**. It is usually given orally. As an analgesic, it works only *symptomatically* (it suppresses the consequences, but does not eliminate the cause of the pain). Codeine *may not be effective for chronic pain*, but has some effect on neuropathic pain. Codeine can also be used in persistent diarrhea where there is a clinically significant risk of dehydration. With long-term use, however, a complication in the form of *spastic constipation* occurs. Dihydrocodeine has similar effects.

Intoxication and addiction

Codeine, like other opiates and opioids, is physically and psychologically addictive. When taking the usual dose, the intoxicated person feels mild euphoria or apathy, has a slowed psychomotor pace, and gives the impression of a lack of interest in the surroundings. Even when administered intravenously, there is no intense euphoric ecstasy like when morphine or heroin is used.



Structural formula of codeine

Acute intoxication

It occurs after taking an unusually large dose or an unusually high quality drug. Symptoms include pronounced miosis, periodic breathing, pale skin, bradycardia, slurred speech, and above all somnolence to coma. Codeine causes *depression of the respiratory center*, and the greatest risk is therefore respiratory arrest. In such a case, an opiate antagonist (naloxone) is indicated. Another possible complication is aspiration of gastric contents, as opiates irritate the CNS vomiting center and act as an emetic.

Withdrawal symptoms

After sudden withdrawal of long-term codeine, they appear within 8-12 hours. As a rule, lacrimation, sweating, runny nose and yawning are present. Later, fever, vomiting, hypertension, mydriasis, anorexia, muscle tremors and diarrhea appear. Pain in the abdominal area, or pain in the back and limbs are no exception. The withdrawal syndrome can be alleviated by **gradual dose reduction** or by **substitution treatment** (methadone). The process of managing opiate withdrawal symptoms without medication is referred to in Anglo-Saxon literature as the so-called *cold turkey* and is reminiscent of the flu. The withdrawal syndrome lasts **usually 1-2 weeks**, while its intensity gradually decreases.

Links

Related Articles

- Morphine
- Opiates
- Opioid use disorders

References

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