

Nalbuphine may help manage opioid-induced urine retention

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Nalbuphine may help to manage opioid-induced urine retention. Findings from a brief case report are published in *Annals of Internal Medicine*.

Urine retention is common in the hospital setting and is sometimes caused by the use of opioids. Once opioid-induced urine retention develops, resolving it without interfering with pain control can be problematic.

Clinicians from Southern Illinois University School of Medicine saw a patient with a history of alcoholic cirrhosis who was hospitalized for right-sided abdominal pain, and diagnosed with portal vein thrombosis and hepatocellular cancer. The patient was treated with hydromorphone for pain and quickly developed urine retention. The patient did not respond to α -1 blockers and found a catheter to be effective but inconvenient. The clinicians gave the patient a dose of intravenous nalbuphine, an opioid used to treat moderate to severe [pain](#) that has a different mechanism of action than other opioids. The patient responded well to the medication and was able to urinate within the first 6 hours.

According to the authors, these findings suggest that clinicians should consider offering nalbuphine to [patients](#) with opioid-induced [urine](#) retention that does not respond to α -1 blockers who prefer not to continue using bladder catheterization.

More information: *Annals of Internal Medicine* (2018).

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