

can be helpful, as well as looking at other approaches to cope with pain such as psychological techniques, acupuncture or TENS machines.

What will happen about follow-up prescriptions?

For patients discharged from the hospice/hospital: If you need to continue taking opioid painkillers after you are discharged you will be sent home with an initial supply. Your G.P. is then responsible for issuing further prescriptions. Your G.P. will be informed of what medicines have been prescribed and what instructions have been given.

You will be monitored at home by your Specialist Nurse or by the District Nurses to make sure your medicines are working for you and to see if you have any problems. Always make sure you give adequate warning of repeat prescriptions, to avoid running out.

Will there be restrictions to taking opioid medication abroad?

A person taking strong opioids will need to check with the relevant embassy or high commission that these medicines will be allowed in to the country being visited. If allowed, a letter from the person's doctor stating his/her name, address, date of birth, dates of travel in and out of the country and the country being visited, will be needed. This letter will also need to list the medicines, the doses and the total amounts being taken abroad. For people travelling abroad for more than 3 months, a form for a Home Office Licence needs to be completed by the person's doctor and sent to the Home Office. It can take up to 2 weeks for the form to be processed.

What should I do if I have any problems?

You should tell the nurses and doctors looking after you if you have any side effects or are worried about the drugs you are taking. Let them know if the drug is working too, as this will inform any changes necessary to improve the pain control.

When at home, if you or your family are worried that something is seriously wrong, you should ring 999 for an ambulance. Be sure to let them know what medicines you have taken.

Useful Contacts

Princess Alice Hospice Specialist Nurse/Doctor:

- In hours: **01372 461 804**
- Out of hours: **0208 744 9414 / 020 8944 7414**
and ask for the nurse on call for Princess Alice Hospice

You can use the blank space below to write down the name of your medicines and how you should take them.

Blank space for writing down the name of medicines and how to take them, with horizontal dotted lines.

Opioid Medicines

A Guide for...

patients and carers

01372 468811 Princess Alice Hospice, West End Lane, Esher, KT10 8NA



Dates available throughout the year

Your Doctor or Specialist Nurse has prescribed a type of strong painkilling medicine for you that belongs to a group of medicines called ‘opioids’. This will have been discussed with you and your family/carers whenever possible. This leaflet aims to give you more information about these medicines. It is not a substitute for talking to your Doctor or Specialist Nurse and you are always welcome to ask questions about your treatment.

What are *opioid* drugs?

Opioid drugs are very effective painkillers. They are often used when milder painkillers such as Paracetamol do not provide adequate relief. The stronger opioids are also useful to help relieve the sensation of breathlessness.

Opioids are medicines that are derived from, or have similarities to opium – a substance that comes from the poppy plant. The most commonly used opioid drug is Morphine.

Opioids can be weak or strong pain killers. Common examples include:

- Weak Painkillers: Codeine, Co-codamol (a combination of codeine and paracetamol), Tramadol.
- Stronger pain killers: Morphine, Oxycodone (also called Oxynorm or Oxycontin), Diamorphine, Fentanyl, Buprenorphine.

How do I take my *opioid* medicine?

There are several ways you can take morphine:

- By mouth as liquid, tablet or granules
- By injection, which can be via a subcutaneous (just under the skin) injection or pump
- By slow release patch
- By nasal spray/ under the tongue

Opioids come in ‘fast-acting’ forms or ‘slow-acting’ forms. Very often you will be prescribed a combination of both. The slow-acting opioid is designed to give general background pain relief throughout the day. But sometimes, despite this

background pain treatment, pain may “breakthrough”. In this case, a fast acting opioid is useful – it acts quickly to relieve the pain, but does not hang around when it is no longer needed.

What is the maximum dose of *opioid* medicine?

Every person is unique and the dose of drug will be assessed carefully for each individual. There is no accepted upper limit for strong opioids. The maximum dose will be defined by the dose tolerated by the individual.

How long will my pain relief last?

Slow- acting opioid medicine will usually be taken twice a day by mouth and is slowly and gradually absorbed over 12 hours. Opioid pain patches are another form of slow acting opioid medicine (frequency of changing the patch differs with different preparations). Both are usually prescribed with a short acting opioid, in case you develop pain in between doses.

Fast-acting opioid medicine is usually taken by mouth and start working within 15-20 minutes. On average their effect lasts about 3-4 hours. They can be prescribed regularly or just when you need.

You will be reviewed regularly to monitor if the medicines are working for you and to check on any side effects. Always ask your Doctor, Nurse or Pharmacist if you are not sure about how to take your prescribed medicine.

Will I get addicted to morphine if I take it?

Many people worry about this. Opioids are adjusted carefully to the needs of the individual person. Used in this way, the person should not become dependent on (or addicted to) opioids. Some patients remain on a stable dose for a long time. In other circumstances, the dose may need to be increased, depending upon the underlying cause of pain. It is not always the case that this means the underlying cause is getting worse. If you have concerns about this, please talk to your Doctor or Nurse overseeing your care.

If the cause of pain is removed, the opioids can be reduced and stopped without any problem. However, avoid stopping opioids abruptly, as your body will need to readjust to not having them on board. Again, speak with your Doctor or Nurse if you are worried about this.

What are the side effects *opioids*?

Constipation – this is a common side effect and most people need to take a laxative regularly to prevent this.

Nausea (feeling sick) – you may experience a sensation of sickness, especially when you first start taking your medication. This usually wears off after a few days. You may be offered an anti-sickness tablet to help with this.

Drowsiness – many people feel tired or feel that they can’t concentrate, especially when they first start taking an opioid. Again, this usually improves after a few days. You should be able to carry on with your normal activities. However if you do feel drowsy, you should avoid manual tasks such as working with machinery or sharp objects.

Can I continue to drive if I am taking *opioid* medicines?

Most patients can continue to drive. However, you should not drive if you have recently changed your dose or if you feel drowsy or unsafe in any way. Your ability to drive can also be affected by other factors such as your illness and the other medications you are taking. It is your responsibility to judge whether you are fit to drive. We suggest that you talk with your Doctor or Nurse for more advice and we can also provide you with an information leaflet about medication and driving . It is important that you carry evidence of the medicinal use of any opioids when driving, such as a letter from your doctor.

How do I store my *opioid* medicines?

Store in a cool dark place and follow any special instructions on the packaging. It is very important to keep them safely away from children, vulnerable adults and pets. You should never share medicines with anyone else.

When your medicines are no longer needed any unused supply must be taken back to your pharmacist for disposal. If you have been using any special equipment, please talk to your district nurse about what to do next.

Are *opioids* the only form of pain control medications?

There are a variety of different medicines which are helpful for pain control in different circumstances. Pain control can be complex and may not always respond to opioids alone. Use of alternative medication, often in addition to opioids,

