



# Use of Strong Opioids in Palliative Care

Information booklet for patients and carers

## **Use of Opioids in Palliative Care**

Your health-care team thinks that a group of medicines called opioids may be useful in helping you to manage your pain. This booklet aims to help you, your family or carers understand opioids.

### **What is an opioid?**

Opioids are types of painkillers and can be given in several forms such as tablets, capsules, liquid, patches or injections.

- There are weak and strong opioids:  
Weak opioids include: codeine, co-proxamol, tramadol and dihydrocodeine.
- Strong opioids include: morphine, oxycodone, methadone, diamorphine, hydromorphone, fentanyl and buprenorphine.

### **Why have I been prescribed a strong opioid?**

Strong opioids are usually prescribed when pain is not managed by taking the weak opioids such as codeine or tramadol.

### **Why do I have two strong opioids prescribed?**

Pain is often described as background pain (chronic, persistent pain) or breakthrough pain which is a temporary increase in pain intensity.

## **1. Slow release opioids**

Slow release opioids are often used for background pain and can last for 12 hours (e.g. MST, oxycontin and zomorph). These should be taken at the same time morning and evening (e.g. 9am and 9pm).

Slow release opioids that last for 24 hrs (e.g. MXL) should be taken once a day at the same time. They should be swallowed whole. If you have difficulty swallowing please inform your doctor or nurse so that they can prescribe the opioid in an appropriate form.

## **2. Immediate release opioids (breakthrough medication)**

Immediate release opioids (e.g. oramorph, oxynorm and sevredol) are often used to treat breakthrough pain. They may be in liquid, capsule or tablet form. They should start to relieve your pain approximately 20 minutes after taking and last on average for 4 hours. You should not take immediate release opioids more than hourly unless your doctor or nurse advises you to.

It is usual to have a slow release and an immediate release opioid prescribed together (e.g. MST and oramorph or oxycontin and oxynorm).

Please ensure you are receiving the same 'brand name' of your strong opioid each time you collect a new prescription. If you are requiring a lot of immediate release medication you should advise your doctor or nurse so that they can review your slow release opioid and increase if necessary.

Please use this space to write down the name of your 'slow acting' and 'immediate release' strong opioids:

**Slow release strong opioid:**

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Date:    /   /   

**Immediate release strong opioid:**

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Date:    /   /   

## **What are the side effects of strong opioid medications?**

When you first start taking opioids you may have some side effects, these usually stop after a few days. These include:

**Constipation** – is a common issue when taking opioids and you may need to be prescribed a laxative. It is important to take your laxative as prescribed and also drink plenty of fluids. If your bowel pattern becomes problematic please inform your doctor or nurse.

**Nausea** – is a feeling of wanting to be sick. It is common to experience nausea when you start taking a strong opioid and especially with an increased dose, however this often settles in time. If you are experiencing nausea you should inform your doctor or nurse so that they prescribe you an antiemetic (anti-sickness medication) if necessary. Your strong opioid can be changed if it is causing you problems.

**Drowsiness** – it is usual to feel slightly drowsy when you start taking strong opioids or your dose is increased. This feeling often settles in time. It is important you do not drive or operate machinery at these times. If drowsiness persists please discuss this with your doctor or nurse.

## **Will I become addicted?**

When strong opioids are used correctly for pain control it is rare for people to become dependent. If you have had a drug or alcohol addiction in the past you may be slightly more at risk of addiction. It is important to discuss your concerns with your doctor or nurse.

## **What do I need to tell my doctor or nurse?**

You need to inform your doctor or nurse if you require a lot of breakthrough medication or if you are experiencing any of the following:

- More tired than usual and having difficulty staying awake.
- More sick than usual.
- Experiencing muscle twitches.
- Nightmares or hallucinations.
- Feeling confused or more 'muddled' than usual.

## **Can I drive?**

UK law allows you to drive whilst taking opioid medications, however it is important to follow the guidance below:

- It is against the law to drive if your driving ability is impaired by this medicine.
- Check the leaflet that comes with your medicine for information on how your medicine may affect your driving ability.
- Do not drive while taking this medicine until you know how it affects you (especially just after starting or changing the dose of the medicine). Continue taking your medicine as prescribed.
- Do not drive if you feel sleepy, dizzy, unable to concentrate or make decisions, or if you have blurred or double vision.

Further information can be accessed via the website below:  
[www.mhra.gov.uk/home/groups/dsu/documents/publication/con437439.pdf](http://www.mhra.gov.uk/home/groups/dsu/documents/publication/con437439.pdf)

## **Are strong opioids just used in the last stages of life?**

No, strong opioids are widely used for pain control, not only by those that are very ill, but also by those who still have a lot of living to do. Some people are on the same dose of strong opioids for many weeks, months and years as it helps them with their everyday life.

## **Can I drink alcohol?**

Drinking alcohol whilst taking strong opioids may make you feel the effects of alcohol sooner than usual. You may need to reduce the amount of alcohol you drink.

## **Can someone else collect my prescription from the chemist/pharmacy?**

If someone is collecting your strong opioids on your behalf, the chemist/pharmacy may request proof of identity (such as a driving license) as they have strict legal controls on their supply.

## **Can I take strong opioids abroad?**

Yes but you will require a letter from your doctor. If your stay abroad will be for longer than 3 months you will require a Home Office Personal Export Licence which can be downloaded from:

<https://www.gov.uk/travelling-controlled-drugs>

Macmillan Cancer Support also provides information on travelling abroad with opioids which is available from:

<http://www.macmillan.org.uk/Cancerinformation/Livingwithandaftercancer/Practicalissues/Travel/Takingmedicinesabroad.aspx>

## **Can I take other painkillers?**

You may take other painkillers with your opioids if it has been approved by your doctor or nurse. Generally it is safe to take Paracetamol (maximum 4g in 24 hrs) as well as strong opioids.

## **Where should I store my medication?**

Your nurse will provide you with a leaflet on the 'Safe Storage and Disposal of Your Medicines'.

## **What do I do with unused Strong opioid medication?**

Unused strong opioids should be returned to your chemist/pharmacy as they have mechanisms in place for safe destruction. Your nurse will provide you with a leaflet on the 'Safe Storage and Destruction of Controlled Drugs.'

## **What to do if you miss a dose of your 'slow release' strong opioid?**

If you forget to take a dose of your 'slow release' strong opioid you may take it as soon as you remember provided the next dose isn't due.

You would then need to leave the specified amount of time e.g. 12 or 24 hours before taking the next dose. Never take double the dose.

Do not stop taking your medication suddenly without seeking advice from your doctor or nurse.

## **How will I be followed up?**

Once you have started taking strong opioids it is important that you are regularly reviewed either by your Doctor, District Nurse, Hospital Doctor or Specialist Palliative Care Nurse.

## **Who should I contact if I have any concerns?**

In the first instance you should contact your Doctor, District Nurse or Specialist Palliative Care Nurse for assessment and advice. You can also speak with your local chemist/pharmacist who dispenses your medication for advice.

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Telephone: 0300 7900 224

To contact our Customer Service Team:

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