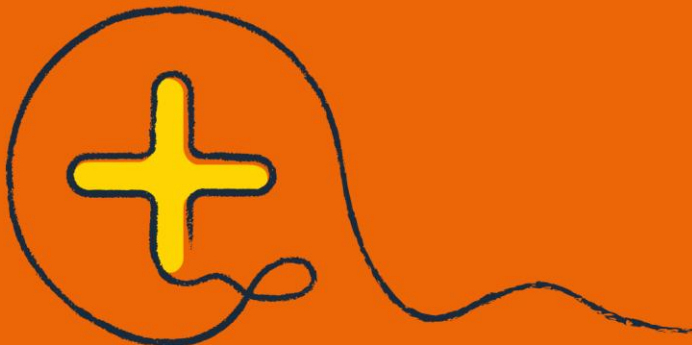


Morphine and other opioid painkillers

**Key facts about the following
medicine(s) you have been prescribed
and how they are used.**





Morphine is one of a group of painkillers called 'opioids' that are prescribed for moderate to severe pain. Other drugs in the opioid group are oxycodone, fentanyl and buprenorphine

1. Using opioids

Opioids:

Can be effective at any stage in a painful illness; they are not just reserved for the end of life.

Are not usually addictive when taken for pain relief. They can be safely stopped when the pain improves.

May be prescribed with other types of pain killers depending on the type of pain that you have. A combination of pain killers may give more effective pain relief.

The most commonly used opioids are morphine and oxycodone in two main forms taken by mouth:

Immediate release (i/r) - these formulations provide fairly rapid onset of pain relief (usually 10-20 minutes). The effect lasts approximately 3-4 hours therefore repeated doses may be needed to control pain effectively.

Examples of i/r preparations include: morphine oral liquid (e.g. Oramorph); morphine tablets (Sevredol); oxycodone oral liquid or capsules (Oxynorm preparations).



Modified release (m/r) - these forms release the drug slowly over 12 hours or longer depending on the preparation, so that pain relief lasts longer. These preparations are designed to be taken regularly at 12 hour intervals (e.g. 8am and 8pm) or once daily at the same time each day.

Examples of m/r preparations include:

morphine m/r (e.g. MST tablets, Zomorph capsules);

oxycodone m/r (e.g. Oxycontin tablets).

If you are not able to swallow your medication reliably, morphine and oxycodone can also be given by subcutaneous injection. Other m/r opioids are available as skin patches, fentanyl and buprenorphine.

What happens when I start taking opioids?

Your doctor will prescribe either an immediate release preparation (usually every 4 hours) or a modified release preparation (usually every 12 hours) starting at a low dose. It is helpful to keep a note of how well your pain responds to the opioids so that you can discuss this with your doctor or nurse.

Your doctor or nurse will arrange to review your pain regularly so that the opioid dose can be adjusted until your pain is controlled.

When your pain is stable, your doctor will normally change you to a modified release preparation taken every 12 hours or to a skin patch which lasts for several days.

It is important to ensure you know which type of preparation you are taking and how to take it. Your doctor, nurse or pharmacist will explain this to you.



What should I do if I experience pain even though I am already taking opioids?

Usually your doctor or nurse will recommend taking a 'breakthrough dose' of an immediate release preparation (such as Oramorph or Oxynorm) in addition to your regular opioid. This will be explained to you by your doctor or nurse when you start taking opioids.

Ensure that you continue to take your regular medication as prescribed. If the pain persists despite taking a 'breakthrough dose', or the pain becomes worse, consult your doctor or nurse as soon as possible.

2. Side Effects

What are the most common side effects of opioids?

Feeling and being sick. This is common but usually wears off within the first 48-72 hours of starting opioids or increasing the dose. Your doctor may prescribe anti-sickness medicine to prevent this.

Constipation is very common. Your doctor will usually prescribe a laxative to take regularly with your opioid medicine.

Drowsiness, dizziness and/or mild confusion can occur when you first start taking opioids, or when you increase the dose. It is usually mild, wearing off within 48-72 hours. If you get side effects which do not settle as expected, your doctor or nurse can advise about options to resolve these. **Do not stop your opioids without consulting with your doctor or nurse.**



What should I do if I think I am experiencing any side effects from my opioid medication?

Contact your doctor, pharmacist or nurse for advice during working hours or if you think it is serious, contact the emergency doctor.

What should happen if I develop breathing difficulties or confusion/ impaired consciousness while taking opioids?

Breathing difficulty or impaired consciousness due to opioids is rare. **If this happens, dial 999 for an ambulance. If an ambulance is called, please remember to keep any medicines that have been taken, and their containers, to show the doctor, nurse or paramedic.**

3. Driving and travelling

Can I drive while taking opioids?

Drowsiness may be caused by opioids, particularly when they are first started. This may affect performance of skilled tasks such as driving, using tools or operating machinery.

You should avoid driving after being started on opioids or after increasing the dose (this includes taking additional breakthrough doses) until you are on a stable dose and any drowsiness has settled – this can take several weeks.

You should make sure your reactions are normal before driving or operating machinery.



You must inform your motor insurance company of your medical condition and about any medications you are taking; if you do not it may invalidate your insurance policy.

If you are taking medication which may impair your ability to drive it may be necessary to notify the DVLA. Further information about driving regulations and medical conditions (including when taking medications) is available at: <http://www.dft.gov.uk/dvla/medical.aspx>

If in any doubt about your ability to drive it is safer not to drive.

What must I do if I'm travelling abroad and need to take my opioids with me?

You will usually be able to take a sufficient supply of your medication with you. Talk to your doctor, nurse or pharmacist who will advise you about regulations in the countries you are visiting and regulations for taking opioid medication out of the UK. You may need a detailed letter or special licence to take with you. **Further information is available at:** <http://www.nhs.uk/chq/Pages/2593.aspx>

4. Other Information

Can somebody else collect my strong opioids from the pharmacy for me?

A responsible person over 16 years, with some form of identification can collect your opioid medication from the pharmacy for you. They must sign the prescription to prove collection and state their relationship to you. If possible, telephone the pharmacy to tell them who will be collecting your medicines on your behalf.



When you receive your new supplies of medicines, always remember to check the name and strength to ensure you have been given the correct medicines. If in doubt, ask your pharmacist for advice.

What other advice about taking my opioids is important?

Always keep an up to date list of your current medicines, including ones you buy from the pharmacy, supermarket, via the internet and from health food shops, and take this to all health-related appointments or if you are admitted to a hospital or hospice.

Always take your medicines as directed by the doctor. Do not stop taking your prescribed medicines without discussing with your doctor. Never let other people take any medicines that have been prescribed for you.

Alcohol can enhance some of the side effects of opioids. Intake should be avoided if you are experiencing side effects and used with caution while taking any medications (including opioids) that can cause drowsiness.

Always discuss any concerns and questions you may have about any aspect of taking opioids with your doctor, nurses or pharmacist.

How should I store my opioids at home?

Securely closed in the original container with the label intact. Out of sight and reach of children. Safely where you or your carer can easily find them. Away from direct sunlight, heat and moisture.

How should I dispose of unwanted opioids?

Return to a community pharmacy for safe disposal. They must not be flushed down the sink or toilet or placed in the refuse bin.

This V1 leaflet was published by St Catherine's Hospice in April 2017 and will be reviewed every two years.

If it would be helpful to have this leaflet in another format or language please call the main hospice switchboard on 01293 447333.

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