Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Taking Strong Opioids

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Taking Strong Opioids (Painkillers) for Pain Control

Patient Information

Supportive and Palliative Care

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Introduction

This leaflet gives information about strong opioids taken by mouth or in patch form. It does not replace the need for personal advice from a qualified healthcare professional. Opioids that need to be given by injection should only be given under guidance of a healthcare professional.

What are opioid painkillers? Why do I need to take them?

Opioid painkillers are a group of medicines derived from morphine for the treatment of moderate to severe pain. Some examples of strong opioid painkillers are morphine, oxycodone, fentanyl and methadone.

Strong opioids are used to treat severe pain that is not relieved by simple analgesia alone, such as paracetamol or ibuprofen, or weaker opioids such as codeine or dihydrocodeine. Although you still have pain, opioids keep your brain from sending your body the message. They do not treat the cause of the pain. Opioids can also be used to help manage breathlessness as they control and slow down rapid breathing.

How effective are they likely to be?

Opioids are very effective at reducing pain intensity and there is good evidence for their use in reducing severe pain. It is unusual for opioids to stop pain completely. The aim of treatment is to reduce your pain enough to help you get on with your life. Some types of pain might respond better to other medicines than to opioids. Your team will only prescribe opioids for you if they think they are the best treatment for your pain.

How much do I take and how often?

The amount needed to control pain varies from person to person. There is no standard dose of opioid and pain is a very personal experience. You will usually start with a low dose and gradually build up until you find the dose that suits you.

If pain is always present, it is called background pain. It is important to control background pain by taking a dose at a regular time each day. If you are able to take medicines by mouth, this will be a modified release or sustained release medicine. These take a few hours to start reducing pain and last 12 hours.

Alternatively, you may use opioid patches that release medication through the skin. Depending on the type of patch, pain relief can last from three to seven days.

A sudden and intense pain, in addition to the background pain, is called breakthrough pain. You will also have an additional, short-acting (immediate release) medicine for breakthrough pain.

You should take the short-acting medicine when you experience breakthrough pain. It can take 20-30 minutes to start reducing pain and should last for up to four hours. If you feel the dose is not enough, you should discuss this with your health-care team. Your health-care team will adjust the dose to give you pain relief most of the time, without too many side effects.

Can I take these medicines long-term?

While opioids can have a positive benefit for some people living with long-term pain they can have serious consequences when they are not providing sufficient benefit or are being taken in a manner that was not intended. It is important to consider the risks and benefits of continued opioid therapy with your prescriber on a regular basis. Recent medical literature suggests that the risks to your health increase significantly when taking opioids at high doses for a long period of time. If you take opioid drugs for many months or years, it can affect your body in several ways. These problems can include:

- Reduced fertility

- Low sex drive
- Irregular periods
- Erectile dysfunction in men (the inability to keep an erection)
- Reduced ability to fight infection
- Increased levels of pain

If you are worried about any of these problems, please discuss this with your healthcare team. Your team will be able to tell you whether you are at risk of developing these problems.

Everyone prescribed opioid medicines in the long-term should have them reviewed by their prescriber at regular intervals. If this does not happen ask your General Practitioner.

If you want to try reducing your dose, you should discuss this with your doctor and bring the dose down slowly.

Many people find that after a few months they can reduce their opioid dose without the pain increasing. Many individuals can reduce gradually their opioid dose and find that their pain is no worse. As fewer side effects are experienced, quality and enjoyment of life can improve. All of this contributes to greater physical fitness.

What if I forget to take a dose?

Take it as soon as you remember. However, if it is almost time for your next dose, skip the missed dose and take your medication as normal.

Do not take two doses together.

What about the side effects of strong opioids?

When you first start taking opioids, you may experience some of the following side effects:

- feeling sick (nausea)
- being sick (vomiting)
- feeling dizzy
- feeling sleepy and
- feeling confused.

These side effects usually go away after a few days but can sometimes go on for longer. Your healthcare team may give you some other medicines to help, such as anti-sickness tablets. Remember that feeling dizzy, sleepy, or confused can impair your concentration and may affect ability to drive and undertake other manual tasks.

Constipation is a common problem and affects nearly all patients. You may need medicines to treat constipation. These take time to work so it is important to take them regularly if needed.

If you experience many side effects, your healthcare team may suggest changing to another

opioid medicine.

Signs of opioid toxicity

There may be situations when strong opioid medication can build up in your system and cause you to become unwell. This may be as a result of having another illness such as an infection, a change in the functioning of your kidneys or the medication just not suiting you. The signs of this can include:

- Excessive sleepiness or drowsiness
- Confusion
- Small pupils
- Slowing of your breathing rate

If you are worried you may be suffering from toxicity, contact your health-care team immediately or present to Accident and Emergency if they are unavailable.

Reviewing and stopping opioid painkillers

Your healthcare team at home should offer you frequent reviews and supply you with more medication when you need it. It is important that you do not stop your medication suddenly without speaking to your healthcare team first. They can give you information on who to contact if you have any problems outside of normal working hours.

Can I drive if I am taking strong opioids?

UK law allows you to drive if you are taking opioid medicines. However, you are responsible for making sure you are fit to drive.

It is important that you do not drive until you see how it affects you. Your reactions and alertness will be affected. You should NOT drive if your dose has changed or if you feel unsafe. You do not have to inform the DVLA that you are starting an opioid. However, there may be other information about your illness that the DVLA needs to know. Contact the DVLA for the most recent guidance.

Guidance document from the Department for Transport:

www.gov.uk/government/collections/drug-driving

Is it safe to drink alcohol when I am taking opioids?

Alcohol and opioids together cause sleepiness and poor concentration. You should avoid alcohol completely when you first start on opioids or when your dose has just been increased. When you get on a steady dose of opioid, you should be able to drink modest amounts of alcohol without getting any extra unusual effects.

Dependency and addiction

As with all strong painkillers, there is a risk that you may become addicted or reliant on these tablets.

You may wish to discuss this with a health care professional.

You should NOT stop taking your opioid medicine except under advice from a doctor.

Storing strong opioids

In your own home, strong opioids should be stored away from the sight and reach of children and animals and kept in a cool dry place avoiding direct sunlight.

Disposing of strong opioids

If you have any unused or out of date medicines these can be taken to a community pharmacy (not hospital) and they will dispose of them in a controlled way. Do not throw medicines in domestic waste.

Who can I contact with questions or concerns?

Please ask your healthcare team if you have any questions about this leaflet or concerns about your treatment.

Name:			DOB:	
NHS number:				
Name of Painkiller (analgesic)	Dosage	Frequency	Maximum dose in 24 hours	Comments

Further sources of information

MacMillan Cancer support at: www.macmillan.org.uk



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