
Introduction

Strong opioids are a group of medicines which are used to treat moderate to severe pain. Examples include Morphine, Oxycodone, Fentanyl, Buprenorphine and Methadone. There are many trade names by which each product may be known. Your healthcare team may recommend these medications to help manage your pain and improve your quality of life.

When are strong opioids used?

Opioids have been used for many years to successfully treat pain. Strong opioids are usually used when initial treatment with other pain killers, such as Paracetamol or weak opioids such as Codeine or Tramadol, have not been effective. They are often used in combination with other pain killers.

How effective are strong opioids?

Each person experiences pain differently so it is important that your treatment plan is tailored around you. Although we know strong opioids are effective in controlling pain, it may be that it is not possible to completely get rid of the pain. The aim is to reduce it enough to improve your quality of life, allowing you to carry out realistic day to day activities.

Will I have to take opioids forever?

Like all medications, your strong opioid painkillers will be regularly reviewed by your healthcare team. It may be possible to reduce or stop your opioids in the future if you have less pain than you do now. However, if the cause of the pain is still there, it may be that you need to carry on taking them.

How are opioids taken?

Opioids come in many different forms like liquid, tablets, capsules, patches, injections and sprays. They come in two forms:

- **Short acting forms** may be described as 'immediate release' or 'rescue' or 'as needed' medication. This form usually starts working in 15-30 minutes and lasts for four to six hours.
- **Long acting forms** may be described as 'modified' or 'extended release' or 'slow release' or be in a form of a patch on the skin.

What happens when I need to start taking opioids on a regular basis?

- Your doctor, nurse or pharmacist will explain how to take your medicine and the instructions will also be on the pharmacy label.
- You will be supplied with either an immediate release preparation to be taken on a regular basis, or a modified release preparation / opioid patch, starting at a low dose.
- If you are starting on an immediate release preparation, once your pain is well controlled, your doctor or nurse will normally change you to a modified release preparation or an opioid patch.
- Your doctor or nurse will arrange to review your pain relief regularly so that the opioid dose can be adjusted until your pain is controlled.

Will I become addicted to strong opioids?

Taking strong opioids for pain relief will not make you an addict. It is important however, not to suddenly stop your opioid medication without discussing this with your healthcare team as you can get withdrawal symptoms. This is NOT the same as addiction.

What are the main side effects to look out for?

When you first start taking strong opioids, you may get some side effects which typically reduce over a few days. If these symptoms continue, it is important to discuss this with your healthcare team.

- **Constipation is very common.** You should be prescribed a laxative to take regularly, while you are on opioid medicines. You will probably need to take this for as long as you are taking an opioid medicine.
- **Feeling and being sick.** This is common but usually wears off within the first few days of starting or increasing the dose of opioid. You may be prescribed anti-sickness medicine to prevent this.
- **Mild drowsiness or dizziness** can occur when you first start taking opioids or when you increase the dose. These mild symptoms usually wear off within a few days.
- **Dry mouth.** Frequent sips of cool drinks or sucking on boiled sweets, ice cubes, frozen pineapple/melon or chewing gum may help with this. Medications are available to treat dry mouth by replacing saliva in the form of mouth gels or mouth sprays.
- **Other Side Effects:** Muddled thoughts, confusion, twitching or jumpiness, nightmares, reduced rate of breathing, difficulty passing urine. If these occur, contact your nurse or doctor for advice as it may be necessary to reduce your dose or change your opioid medicine to a different one.

Does the use of morphine or other opioids mean it is near the end of my life?

No, opioid pain killers are useful to control pain that occurs at any point in someone's life.

Is there a maximum dose?

You will start on a low dose of opioid and it may be that your dose is gradually increased over time, depending on your pain and how good the drug is at reducing the pain.

How should I store my opioid medication?

Like all medication, strong opioids should be kept in a safe dry place and out of the reach of children. Do not share your medications with anyone else.

Can I drink alcohol while taking strong opioids?

Alcohol and opioids together can cause sleepiness and poor concentration. When you first start on opioids, or when your dose has just been increased, you should avoid alcohol and driving. You should also avoid alcohol completely if you are going to drive or use tools or heavy machinery while taking strong opioids. Once you are on a steady dose of opioid you should be able to drink alcohol in moderation without experiencing any unusual effects.

Can I drive when I am taking opioids?

Yes, as long as your ability to concentrate and drive is not impaired. You are responsible for making sure you are safe on each occasion that you drive and should not drive if you have needed extra medication around the time of driving.

How will I be followed up?

Once on opioids, it is important that you are regularly reviewed either by your GP, district nurse, hospital doctor or specialist palliative care nurse.

Who can I contact?

James Paget Palliative Care secretaries: (9am-5pm Monday - Friday) 01493 452804
Community Palliative Care at St Elizabeth's Hospice: (24/7) 0800 567 0111
Community District Nursing Service: Via Care Coordinator Centre 0300 123 2425

Your Feedback

We want your visit to be as comfortable as possible - talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve it, then ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care.

Before leaving please complete a Friends and Family Test feedback card.

Help us transform NHS services and to support patient choice.

OUR VALUES

Collaboration

We work positively with others to achieve shared aims

Accountability

We act with professionalism and integrity, delivering what we commit to, embedding learning when things do not go to plan

Respect

We are anti-discriminatory, treating people fairly and creating a sense of belonging and pride

Empowerment

We speak out when things don't feel right, we are innovative and make changes to support continuous improvement

Support

We are compassionate, listen attentively and are kind to ourselves and each other



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

For a large print version of this leaflet, contact PALS 01493 453240