

Common questions

“Isn’t Morphine just used in the last stages of life?”

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

Although strong opioids are often used for controlling cancer pain or pain associated with worsening disease, being prescribed this medicine is not a sign that your disease is getting worse.

“Will I become addicted to opioids?”

No. Many people are frightened about becoming addicted to morphine or other strong opioids. However, when this type of medication is prescribed appropriately to relieve symptoms, there is no evidence that it causes problems with addiction.

If you feel you no longer wish to continue taking a strong opioid, please discuss this with your doctor who will work with you to reduce the dose gradually.

You should not suddenly stop a strong opioid.



Further information

Do not hesitate to discuss any concerns with your doctor or healthcare professional.

You can also refer to:

- The Patient Information Leaflet provided with your medication.
- “Opioids in palliative care (patient version)
- NICE Guidance (2012)” available at www.nice.org.uk/guidance/cg140/resources/palliative-care-for-adults-strong-opioids-for-pain-relief-pdf-35109564116677
- MacMillan Cancer Support’s “Different types of painkillers” leaflet, available at www.macmillan.org.uk/information-and-support/coping/side-effects-and-symptoms/pain/levels-pain-different-strengths-painkillers.html#8367



Opioids

This leaflet has been given to you because you are either being started on or are already taking a medicine known as a strong opioid. The healthcare professional providing you with this leaflet will be happy to explain in more detail the information it contains.



Together, we’re making every moment matter

Birmingham Hospice is the new name for Birmingham St Mary’s Hospice and John Taylor Hospice.

What is a strong opioid?

There are many different strengths of painkiller suitable for different types of pain.

Usually, the first step to manage pain is to start a simple painkiller like paracetamol. If this is not effective, then the next step is to add a stronger painkiller from the 'opioid' family.

This group of painkillers includes 'weak' opioids, like codeine or tramadol, and 'strong' opioids, like morphine and fentanyl.

The dose of opioid can be adjusted up or down to match the level of pain. Strong opioids are medicines that are most commonly used to relieve pain, they can also be used to relieve breathlessness or coughs. Common examples of strong opioids are:

- Morphine
- Diamorphine
- Fentanyl
- Buprenorphine
- Oxycodone

Opioids come in different forms including tablets, capsules, liquids, patches, and injections. You will have the opportunity to discuss the differences between these and which suits you best.

People are sometimes anxious about starting on opioid therapy, but we know when prescribed and monitored properly these are safe and very effective painkillers.

Strong opioids also come in different brands and strengths. If you notice that your opioid medicine changes and you are unsure at all, please discuss this with your Doctor or Pharmacist.

How to take opioids

It is common to be prescribed a regular opioid, this could be a medicine taken twice a day, every day or a patch changed every few days. The one you are prescribed will be the one best suited to your needs.

This regular opioid is used to treat the pain you have all the time which is called 'background pain' so it is really important to take this regularly to help with your symptoms.

Write name of medication here:

.....
Write when to take/apply it here:

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However, you may still experience pain in between doses of your regular opioid. This is known as 'breakthrough pain'.

For 'breakthrough pain' you will be prescribed an 'immediate release' opioid, which usually acts within 15-30 minutes. This medication can be used if your pain gets worse in between your regular medication. We call this 'as required' medication.

Monitoring

If you need to take breakthrough medicine in between your regular medicine it is helpful to write down what you took, the time of the dose, the amount taken and whether it helped to relieve the pain. This can help your healthcare team adjust your doses if needed.



Prescriptions

The hospice team or your GP will provide you with prescriptions for your opioid medication. Repeat prescriptions will usually come from your GP. Strong opioids are also called 'controlled drugs', these are restricted under the law, for example prescriptions are only valid for 28 days after the date on the prescription and only up to 30 days can be supplied to you at a time.

Side Effects

It is common to experience some side effects, especially when you first take a new medication.

Drowsiness

This should improve after a few days of taking these drugs or after a dose increase. Until this has settled it is best to avoid drinking alcohol. It is also advised to stop driving or operating machinery during this period.

Nausea

Some patients may experience nausea (and rarely vomiting) when they first start a strong opioid. This should improve by itself after a few days but if it becomes problematic your doctor will be able to prescribe you anti-sickness medication.

Constipation

This affects most people taking any type of opioid. Your doctor will usually prescribe a laxative for you to take to prevent constipation becoming a problem. It is important to drink plenty of fluids and to take laxatives regularly.

Other potential side-effects

Other less common side-effects include itching, heartburn, change in taste of some foods and a difficulty in passing urine.

If you experience any of these side-effects, please tell your healthcare professional.



When to seek medical advice

Seek medical advice if you experience one or more of the following:

- If you experience an allergic reaction to your medication.
- If your pain gets worse and is not controlled by your current medication.
- If you become more drowsy or sleepy than usual.
- If you are being sick for more than 24 hours.
- If you feel confused or not quite yourself.
- If you experience hallucinations or bad dreams.

Storage

Always store your medicines in a cool, dry, safe place out of the reach of children. It is important to remember that this medication is for your use only and should not be shared.

Disposal of patches

Patches containing opioids are unsafe to other people especially children. Even after they have been removed, they can cause harm. We recommend that once removed, patches are folded together and then disposed of out of the reach and view of children.