Opioids for Symptom Control in Palliative Care

Patient and family information

Why has this been prescribed?

- Opioids are medications used to control your pain, shortness of breath or cough. Some examples are: morphine, hydromorphone (Dilaudid®), codeine, oxycodone, tramadol, fentanyl, buprenorphine (Butrans®) & methadone.

How should opioids be taken?

- When symptoms are persistent, opioid medications work best when taken at regular times so symptoms do not ‘break through’. Do not wait to feel your symptom, take your scheduled dose on time. If you feel pain between scheduled doses there should be a smaller dose available to take for ‘breakthrough’ symptoms.

- Keep track of your symptom, when it occurs and the intensity, using a symptom diary. Keep a record of all extra doses taken. These steps are key to your doctor or nurse practitioner finding the right dose to manage your symptoms.

- Opioid medications come in a number of types & different strengths. Some types are: liquids, tablets, capsules, suppositories, skin patches and injections. Medications differ as to when they start to take effect and the length of time relief lasts. You may be prescribed more than one type; one to take regularly and another type to take for ‘breakthrough’ symptoms.

- If you need an injection, a small soft catheter may be left in place in the tissue under the skin. This allows medication to be given without further injections.

What are the side effects and how are they managed?

- **Constipation** is a common and ongoing problem when taking opioids. If you can, drink plenty of fluids to help keep stools soft. When taking an opioid, you’ll also need to take laxatives daily as prescribed.

- **Drowsiness** can be common when you first start to take opioids or after a dose increase. These symptoms usually disappear after 3-4 days.

- **Nausea** may happen for a few days after you begin to take opioids. Try eating small amounts of food often during the day. Tell your doctor or nurse, if you feel really sick or if nausea continues for more than 2 days.

- **Uncommon side effects** include sweating, itching, hallucinations, and difficulty passing urine. Talk with your doctor or nurse right away if you have any of these side effects.

If you have any questions that are not answered here, please ask a care provider for more information.
For other health information, please visit www.viha.ca
• **Avoid changing the amount or skipping medication doses** on your own. Stopping your medication due to side effects may leave you in pain. A different opioid may be needed.

**What about my concerns?**

• **Will I become addicted?** Addiction is extremely rare when opioids are used as prescribed for palliative care. When you take prescription opioids, your symptoms are monitored closely. Your dose may need to increase or decrease. If you stop your medication suddenly you can feel quite ill, but this is not the same as the "cravings" of addiction. If your symptoms can be controlled in other ways, opioids can be slowly reduced and stopped, no matter how much you take or how long you have taken them.

• **Aren't these drugs risky?** Opioids can be used as prescribed safely and effectively for weeks, months or years to treat symptoms.

• **If my pain increases, will the opioid continue to be effective?** Opioids can be safely increased to continue to effectively manage your pain. Other medication can also be added to keep the pain under control. In some cases a different opioid may be required.

• **Could I be allergic?** True allergy to opioids is rare. You may have side effects which are often mistaken to be an allergic reaction.

• **Can I drink alcohol while on this medication?** Discuss these questions with your ordering doctor or nurse practitioner. Their recommendation depends on your particular situation.

• **Talk with your health care team about any worries.**

**Is there anything different about getting opioid prescriptions filled?**

• A new prescription is usually required for each refill. Some opioid prescriptions must be filled within 5 days from the date they are written. Discuss refill procedures with your pharmacy.

• It is best to deal with the same pharmacy so that enough medication is kept on hand. This also allows the pharmacist to keep a complete record of your medication.

• If cost is preventing you from taking your medications, discuss this with your doctor or nurse. Alternative treatments or special funding may be available. Most opioids are covered by palliative benefits in BC.

**All medication should be kept in a safe place, out of reach of children.**

**RETURN ALL UNUSED OPIOID MEDICATIONS TO THE PHARMACY**

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**DEPARTMENT:** Palliative & End of Life Care