

Taking Strong Opioids for Pain or Other Symptoms

Information for Patients and Carers

There are many different types of medications available to help relieve pain.

One type of strong painkiller is called an opioid.

What is an opioid?

Opioids refer to Morphine and 'morphine type' medications. They have been used to **relieve pain** for many years. They include:

- Weaker painkillers such as Codeine, Dihydrocodeine and Tramadol
- Stronger painkillers such as Morphine, Diamorphine, Oxycodone, Fentanyl and Buprenorphine

Stronger opioids can also be prescribed to help **breathlessness and cough**. There is a section later on in the leaflet which talks about this.

Opioid medications are available as tablets, liquid medicines, suppositories, skin patches and injections.

Will I become addicted to Morphine or morphine type drugs?

It is very rare for people to become addicted when they are taking these medications for pain or other symptoms. However, your body may become used to the medication if you take it for some time. This means that if you stop taking it suddenly, you may experience some unpleasant symptoms. These include stomach cramps, diarrhoea and sweating. Do not stop taking your medication except under advice from your doctor/nurse. If your medication is no longer needed it will be possible to discontinue it safely within a few days.

Do the medications work for all kinds of pain?

Opioid medications relieve many but not all types of pain. Your doctor or nurse will assess your pain to decide whether strong opioids may help.

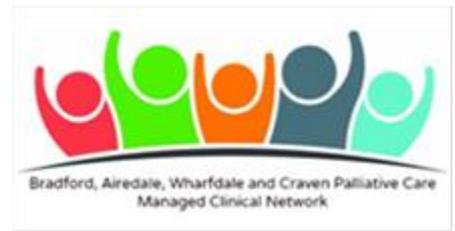
Starting strong opioid medication

The medication will be started by your doctor or nurse at a low dose. If necessary, they will advise you how to gradually increase the dose in order to find out whether they are effective and what the correct dose is for you. The dose needed to control pain varies greatly between individuals.

What side effects am I likely to experience?

Here are some side effects you may experience when you start taking the medication or when the dose is increased:

- Constipation. This is very common and you will probably need to take a regular laxative.
- You may feel sick for the first few days after starting but it usually settles down. Anti-sickness medication can be taken to prevent it.
- Mild drowsiness. This usually wears off after a few days.



Can I take opioids with other medicines?

Yes. Opioids do not usually cause problems with your other medicines. In fact, they are often prescribed in addition to other pain medicines such as regular Paracetamol or Ibuprofen, as they work in different ways to reduce pain.

Aren't these drugs only used in the last stages of life?

No. Opioids are widely used for pain control, not only by those who are very ill, but also by people who have a lot of living to do. Some people take them for many years, as they help with their everyday life.

Will they stop working for pain?

Although your body gets used to most of the side effects, the medications normally go on working for pain. This means there is no need to wait until pain becomes severe before starting to take them. Sometimes the dose needs to increase over time but this is not dangerous.

Are there any other effects that I should be aware of?

Tell your doctor or nurse as soon as possible if you experience any of the following:

- More muddled thoughts
- Feeling restless or jumpy
- Feeling very drowsy or dropping off to sleep
- Bad dreams or hallucinations

Your doctor/nurse may reduce the dose or suggest other treatments for your pain.

Why have I been prescribed TWO strong opioids?

Often it is helpful to have two strong opioids to be used in different ways:

- A short acting preparation: They act quickly (within 30 mins) but usually wear off within a few hours. They are also effective for breakthrough pain.
- A long acting preparation: They take a few hours to start reducing pain but they last 12-24 hours depending on the type prescribed. Skin patches may also be used and these last for 3-7 days.

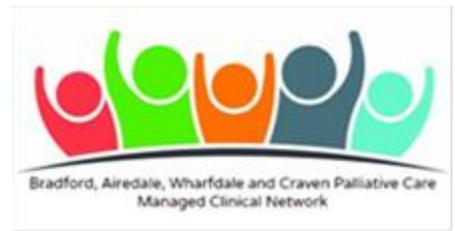
Long acting preparations are used to control pains which are present most of the time. Taking them **regularly** helps to prevent the pain coming back.

What is breakthrough pain?

Even when taking painkillers, it is common to experience times when pain gets worse for a while. This is called 'breakthrough pain' and it can last from minutes to hours. It can occur for no apparent reason or it can be brought on by movement. Your doctor/nurse can prescribe a short-acting opioid to take as required for this type of pain. Discuss episodes of breakthrough pain with them, in case your painkillers need to be adjusted.

What should I do if I need to do something that will cause my pain to come on?

If you know something in particular triggers your pain (e.g. taking a shower) take the short acting painkiller before the event. Your doctor or nurse will advise you how long in advance to take it.



What should I do if I have unpredictable pain?

If your pain is unpredictable, take the short acting opioid as soon as it starts, since it may take some time to work.

What else can I do for my breakthrough pain?

Some people find their pain improves with resting, rubbing the painful area, using heat (e.g. a hot water bottle) or cold (e.g. an ice pack).

What should I do if my pain is not controlled?

Speak to your doctor or nurse as soon as possible.

Opioids for Breathlessness and Cough

Although opioids are painkillers they also relieve breathlessness and cough. They can make breathing feel less hard work and help you feel less anxious. If cough or breathlessness troubles you during the night opioids can help you sleep better. Your doctor or nurse may advise you to take the medication in various ways, for example:

- Just at bedtime
- At times when you feel particularly breathless or anxious
- Before doing something which you know will make you breathless
- Regularly throughout the day

OTHER PRACTICAL ISSUES

How do I store strong opioids at home?

Keep the medications in their original containers, clearly labelled and stored safely at room temperature in a dry place, preferably in a locked cupboard, out of the reach and sight of children.

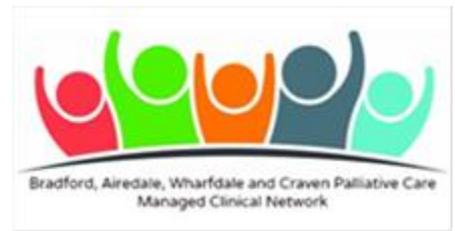
What do I do with unused medications?

Unused medications should be returned to your local pharmacy for safe disposal. Do not flush them down the toilet or throw them away.

How do I use a strong opioid skin patch safely?

If you are prescribed a strong opioid in the form of a patch, there are several important steps:

- Make sure your patch is stuck on securely by pressing on it for 30 seconds. A patch can cause serious harm if it accidentally sticks to someone else's skin or is swallowed- seek medical help if this happens.
- Avoid heating patches (eg with a hot water bottle or a long hot bath) as heat can cause a dangerous amount of medicine to be released from the patch.
- Your doctor or nurse will tell you how often to change your patch. It is important that you remove the old patch when you apply a new one. The old patch can still contain some medication, so you should fold it in half, so the sticky side sticks to itself, as soon as you remove it. Ideally put this back in its' original sachet, and you can then place this in the bin with your household waste, but make sure it is out of sight and reach of children.



Can I drink alcohol when taking strong opioids?

Strong opioids may make you more sensitive to the effects of alcohol. However, many people can safely continue to drink modest amounts (1-2 units per day). Ask your doctor or nurse if you feel unsure about this. When you are taking opioids you should **NOT** drink alcohol if you are going to drive or operate machinery.

Can I continue to drive whilst I am taking these medications?

It is an offence to drive with certain drugs above specified blood levels in the body. These drugs include strong opioids. Most patients that are fit to drive and are taking medicines as directed are unlikely to be above the specified limits and therefore would not be committing an offence.

Even if you are above the specified limits but your driving is not impaired and you are taking your medicine in accordance with the advice of a healthcare professional, you will still be within the law.

It remains an offence to drive while your ability is impaired by medicines or illness.

If in doubt, you should not drive.

For more information go to www.gov.uk/drug-driving-law

Here is a checklist about driving:

- You should not drive for several days after starting or **increasing** the dose of your opioid. Sometimes longer is needed.

Make your first trip:

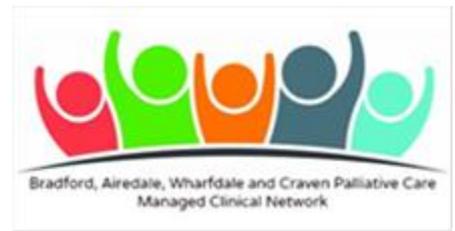
- Short
- On roads that you are familiar with.
- At a time when the traffic is not too busy.

You may find it helpful to have an experienced driver accompanying you to begin with in case you find that you are unable to complete your journey.

- You must not drive on days when you have needed to take extra doses of opioid.
- Like everyone else, you have a responsibility to only drive when you are fit to do so. You must not drive if you feel sleepy, dizzy, unable to concentrate or make decisions, or if you have blurred or double vision. If in doubt, don't risk it! Your doctor or nurse can help you decide whether it is safe.

Should I inform the Drivers Vehicle Licensing Agency (DVLA) that I have been prescribed strong opioids?

You do not need to inform the DVLA. However there may be other information about your illness that the DVLA needs to know. Your doctor/nurse or the DVLA can advise you about this.



How to contact the DVLA

Website:

www.gov.uk/government/organisations/driver-and-vehicle-licensing-agency

Telephone number: 0300 790 6806
(You will need to give your driving licence number).

Postal Address:

Drivers Medical Enquiries
DVLA
Swansea
SA99 1TU

Car Insurance

You may need to inform your motor insurance company about your current state of health and what medication you are taking. Each insurance company is different. It is best to discuss your circumstances with your insurance company to be sure that you are covered.

What should I consider before travelling abroad with strong painkillers?

1. All prescribed strong painkillers need to be carried in hand luggage in their original packaging i.e. not in unlabelled pill organisers or bottles.
2. Be aware of current restrictions regarding volume of liquids carried in hand luggage when flying.
3. You must obtain a letter from your doctor confirming the following details
 - Your name, address and date of birth.
 - The outward and return dates of travel.
 - The country / countries being visited
 - The names, dosages and total amounts of the medications being carried.
4. If you are travelling to or from the UK for a period of *less* than 3 months you may carry a supply of strong painkillers through UK customs without the need for a specific Home Office Licence.
5. If you intend to travel for a period *greater* than 3 months, you will need to apply in advance for a Home Office personal export licence.

A personal licence can be downloaded from:

www.gov.uk/government/publications/personal-import-export-licence-application-form

You need to apply at least 10 working days before your intended travel date.

6. It is important to check with the relevant embassy/consulate that the country or countries you intend to visit will permit you to enter with a supply of opioids for medical use. For more information, refer to:

www.gov.uk/government/publications/contact-an-embassy



If you have any questions about the information in this leaflet or have any concerns about your medications please speak to your doctor, nurse or pharmacist.

The leaflet has been produced by the Bradford, Airedale, Wharfedale & Craven Palliative Care Managed Clinical Network
<http://www.palliativecare.bradford.nhs.uk>.

We are grateful to acknowledge it is based on leaflets produced by the Northern Ireland Guidelines and Audit Implementation Network (GAIN) and the Swansea NHS Trust.

www.gain-ni.org

<http://palliativedrugs.org/download/drivingandopioidsadviceleaflet.pdf>

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