What else do I need to know?

- How do I store opioids at home? - Keep in their original containers, clearly labelled, at room temperature, in a dry place, out of the reach and sight of children. This will ideally be in a locked cupboard.

- What do I do with unused opioids? - Return them to the pharmacist for safe disposal. Do not throw them away or flush them down the toilet.

- Can I drink alcohol when taking opioids? - Alcohol may increase some of the side effects. Please discuss with your doctor or nurse.

- Will I become addicted? – The effects of strong opioids are different in people with pain compared with drug users. You will **not** become addicted if you take the medication as advised.

- Where will I get my next prescription? – Whilst you are at home your GP will continue to prescribe the medication you need.

There are many misunderstandings about the use of opioids based on what you may have experienced, heard or read. Please discuss any concerns you have with your doctor or nurse and remember that **strong opioids are safe and effective when used correctly.**

IF YOU HAVE ANY OTHER CONCERNS YOUR DOCTOR OR NURSE WILL BE PLEASED TO DISCUSS THESE WITH YOU.

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Taking strong opioids in palliative care/cancer-services/SDHNSFT/06.13/Review 06.15

South Devon Healthcare NHS
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PATIENT INFORMATION

Taking strong opioids in palliative care

Strong opioids are safe and effective when used correctly

What are opioids and why do I need them?

- Medication from the morphine family of drugs including morphine, diamorphine, oxycodone, fentanyl and buprenorphine.
- They are mostly used as a painkiller, but are also sometimes prescribed for breathlessness or cough.
- They can help some, but not all, types of pain.

What side effects am I likely to experience from opioids?

- Constipation – this is very common and you will probably need to take a regular laxative. This may need to be increased as your pain killer is increased.
- Nausea – may occur for the first few days after starting but usually settles. Anti-sickness medication may be needed to prevent this.
- Drowsiness - this usually wears off in a few days.

If you feel muddled, restless or jumpy, or have hallucinations, you must tell your doctor or nurse as soon as possible.

Why have I been prescribed 2 opioid medicines for my pain?

It is common for you to be supplied with a combination of 2 opioids:

- Long acting/slow release opioid – aimed at keeping your pain controlled. This may be in the form of a tablet or patch.
- Fast acting/instant release opioid – to be taken if your pain is not controlled between the doses of the long acting medication. This will be in the form of liquid, tablet, granules or spray and may be referred to as a breakthrough, top up or rescue dose.

The doses of your medications may need to be adjusted over time.

Tips for taking your medication

- Take your slow release medication **regularly** for it to be effective.
- Take your fast acting medication as soon as you have pain because it will take 30 minutes to start working. If you still have pain after this time take another dose, wait again and repeat once more if needed. **If the pain has not gone after 2-3 doses, you should contact your doctor or nurse for advice**. If your pain returns later, you can repeat this again.
- Keep a record of how much fast acting/quick release opioid you have needed to control your pain and show it to your doctor or nurse.
- Speak to your doctor or nurse as soon as possible if your pain is not controlled.
- Keep taking your other pain medications as advised. For example, paracetamol works well with opioids.
- Do not stop taking your medication without speaking to your doctor or nurse.

Can I continue to drive when I am taking these medicines?

Taking opioids can affect your ability to drive. Please ask for more information from your doctor or nurse.