

Strong opioids to manage pain and breathlessness in people with palliative diseases

**Information for patients,
families, friends and carers**

Strong opiates and palliative care

Being offered strong opiates can happen at different stages in the course of a disease and does not necessarily mean you are close to the end of your life.

At St Luke's we believe it is essential that patients and the people important to them play a key part in developing care wishes that meet their needs. Where this involves the use of strong opiates a member of the clinical team will always discuss with you -

- Why they are being used to manage your pain or breathlessness.
- How effective they are likely to be.
- The difference between the management of pain that is constant and continuous known as 'background pain' and pain that is sudden and intense known as 'breakthrough pain'. They will advise you how, when and how often to take them and give you some indication of how long the pain relief will last.
- Possible side effects and things you should be aware of that might indicate there is too much of the medication in your system.
- How to store strong opioids safely at home
- How the pain relief and any side effects will be monitored.
- How further supplies will be obtained from your GP and pharmacy.

This leaflet answers some commonly asked questions but if you have any other questions, queries or concerns please raise them with a member of the clinical team

What are strong opiates?

There are a range of drugs of varying strength that are classed as strong opioids. The usual first treatment you will be offered is morphine in a form that you can take by mouth such as tablets, capsules or liquid.

If you have difficulty swallowing a member of the clinical team will discuss alternatives such as opiate patches.

Are all strong opiates's the same?

There are two main types. These are -

- A short acting type which you may need to take several times a day. This type is known as immediate release.
- A slow release type that you will take less frequently known as sustained release.
- If you are taking a sustained release you should always be offered immediate release as well to help you manage any episodes of sudden and intense pain.



How will the choice of opiate be decided for me?

This will be determined by your type of pain, your condition and what you prefer.

Will I become addicted?

No, but it is important that if you find you no longer need your medication you do not suddenly stop taking it. Talk to your doctor who will gradually reduce your dose.

What are the common side effects of strong opiates?

All strong opiates share some common effects you may experience.

These are -

- **Constipation**

Constipation affects almost all people who take strong opiates. When you are first prescribed strong opiates you should also be offered laxatives to relieve constipation. Laxatives can take some time to work so it is important to use them as advised by your healthcare professional and drink plenty of fluids.

If the constipation becomes severe it may be necessary to change to a different opiate.

- **Nausea**

Using strong opioids may initially make you feel sick. This should only last for a short time but if this is not the case you will be offered anti sickness medication to help you manage the symptoms

- **Drowsiness**

You may initially feel mild drowsiness or difficulty concentrating when you first start taking strong opiates or when there is a dose increase. This should improve after a few days, but until then, it is advisable not to drink alcohol and avoid driving and operating machinery.

Other less common side effects include dry mouth, itching, heartburn, change in the taste of some foods and difficulty in passing urine. If you experience any of these, please tell a member of your clinical team.



Will I still be able to drive?

The law does not automatically prevent you from driving however, you may need to contact your motor insurance provider to ensure they are aware and confirm your insurance cover.

The law says you are **not** allowed to drive if you feel your ability to drive is impaired, this may be by feeling drowsy, dizzy, being unable to concentrate, unable to make decisions and react, if you have blurred or double vision or other side effects which would impact your safe driving.

If you do feel you are safe to drive, you may wish to carry evidence that the medication is prescribed and that you are taking it in accordance with the advice of a healthcare professional as the police will require this information if they stop you.

It is your responsibility to judge if you are fit to drive, if you are in any doubt do not drive.

Will I still be able to drink alcohol?

You can drink small amounts of alcohol, we recommend no more than 1-2 units per day. However you may find that even small amounts may make you feel more sleepy and some people find it has a stronger effect on them.

How should I store strong opiates at home?

All drugs and medicines should be stored safely.

Your strong opiates should be kept in a cool, dark place that is out of sight and well out of reach of children, vulnerable adults and pets.

We strongly recommend that your strong opiates are best stored in a locked cabinet or container.

If you have any concerns that your medication may be taken by others who have access to your house please raise this concern with a healthcare practitioner or the prescriber.

Is it ok to take the strong opiate with other medicines?

It is generally ok to take strong opiates with other medicines, the person prescribing the strong opiate will provide specific advice. However, you should stop taking weak opiates such as codeine when you start taking your strong opiates regularly.



What things may mean I need to seek medical advice?

- 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
- If you feel restless
- If you feel you no longer need your medication

How will I get my next prescription?

You will need to contact your GP to arrange for your next prescription

As you should not just stop taking your strong opiate medication you should ensure you arrange repeat prescriptions and dispensing to ensure you do not run out of your strong opiate medication.

This information leaflet has been produced giving regard to the guidelines for strong opiates produced by the UK's National Institute for Health and Care Excellence.

If you have any further questions please arrange to speak to a member of the team managing your care.

In patients – Ask to speak to the nurse in charge of the ward 0114 236 9911

Community Patients – Call the patient and family support line 7 days a week 9am-5pm 0114 235 7494

If you would like any further information regarding your medication, please contact your GP

St Luke's
Little Common Lane
Sheffield S11 9NE

www.stlukeshospice.org.uk

Tel: 0114 236 9911
Email: info@hospicesheffield.co.uk

Find us on:
/StLukesHospiceSheffield
@StLukes_Sheff

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