

## Opioid Medicines – Patient Information Leaflet

### **Who is this leaflet for?**

This leaflet is for people due to start or who are already taking opioid medicines. It will give you an idea of what to expect, from starting treatment, to reviewing and reducing your use of opioids. Your healthcare team may also give you suggestions of alternatives to medicines to help you manage your pain.

### **What are opioids?**

Opioids are pain-relieving medicines that are related to morphine. Examples include codeine, co-codamol, dihydrocodeine, tramadol, fentanyl, morphine, and oxycodone. Opioids work by blocking pain signals to the brain. Opioids are considered some of the strongest pain-relieving medicines available.

### **What are opioids used for?**

Opioids can be used for acute (short term) pain, chronic pain (pain lasting longer than 12 weeks) and end-of-life care.

Opioids are very good for acute pain which is short-term and usually related to an obvious injury such as a bone fracture or operation. They are also effective for pain at the end of life.

In the past, opioids have also been used to treat persistent or chronic pain (pain lasting more than 3-6 months). However, we now know that this may not be the best option for this kind of pain. Complete relief of chronic pain is rarely achieved with opioids. The aim of treatment is to reduce your pain enough to help you get on with your life. In trials, most medicines for chronic pain (including opioids) on average only reduce pain by 30%, and only help around one in every four or five people.

You should discuss what you expect from the treatment with your healthcare team.

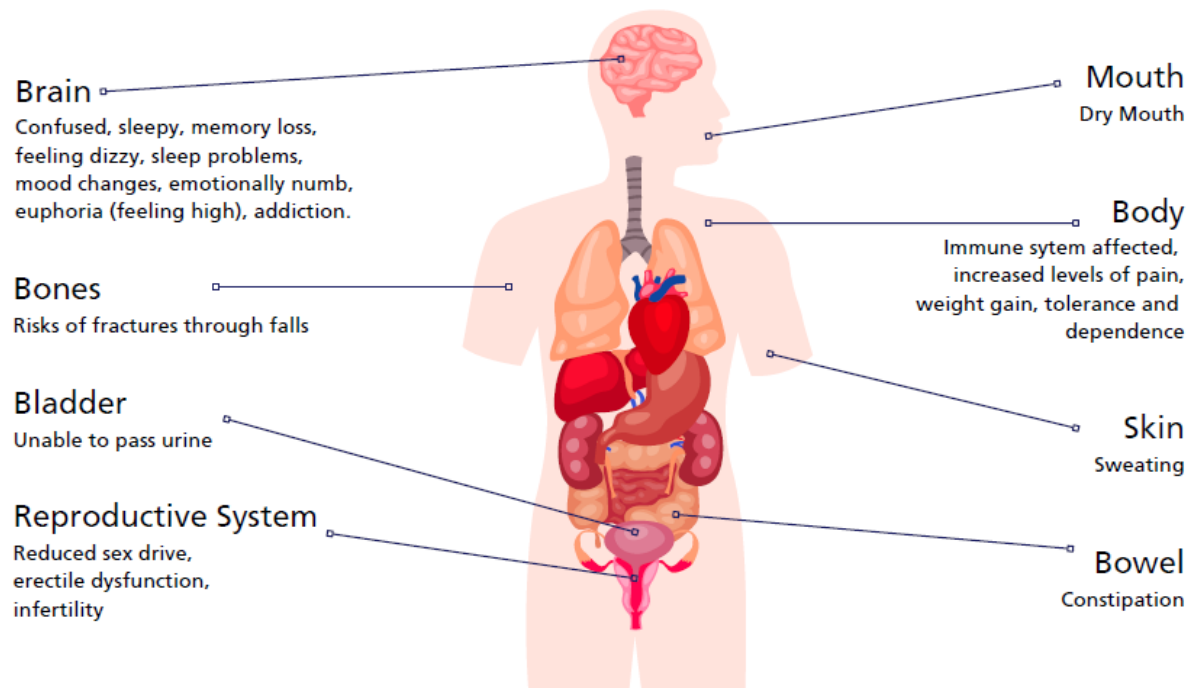
### **What dose of opioid should I take?**

There are no standard doses for opioids as these can vary from person to person. Opioids are usually started at a low dose and gradually increased up to the dose that works best. The correct dose of any medicine is the lowest dose that produces a noticeable benefit.

You should always take the prescribed dose of medicines. If you feel the dose isn't enough, or if the side effects interfere with your life, you should discuss this with your healthcare team.

### **What are the side effects of opioids?**

Before you start taking an opioid, read the manufacturer's information leaflet from inside the pack. This will give you more information about the specific medicine you have been prescribed and a full list of the side effects which you may experience from taking it. The diagram below shows the most common side effects:



You are more likely to get side effects with higher doses.

The most serious side effects, although uncommon, include a condition where you breathe more slowly or weakly than expected (respiratory depression), severe sleepiness and loss of consciousness. This risk increases substantially at higher doses or when the opioids are used in combination with certain medicines such as pregabalin, gabapentin, amitriptyline, diazepam, sleep medication, alcohol and some OTC medicines. If you or your friends, family or caregivers notice that you are having difficulty breathing or that you have become very sleepy or lost consciousness you (or they) should inform your doctor immediately.

Talk to your healthcare team if side effects concern you or do not go away.

### **Can I drive when I'm taking opioids?**

The law in the UK allows you to drive if you are taking prescribed opioid medicines in accordance with the instructions from your prescriber (including what your prescriber advises you about driving safely) and your driving is not impaired. You should never drive if you feel unsafe. Your ability to drive may be affected by other medicines you are taking in addition to opioids, whether you feel tired and by your pain. You are responsible for making sure you are safe on each occasion that you drive.

It may be unsafe to drive in the first few days after starting an opioid and for a few days after a dose change (up or down). Drinking alcohol reduces the amount of opioid medicine you can take and drive safely so do not drive if you have drunk alcohol and taken opioid medicines.

### **Can I drink alcohol?**

Alcohol and opioids both can cause sleepiness and poor concentration. You should avoid alcohol completely when you first start on opioids or when your dose has just been increased. If you are taking opioids, you should avoid alcohol if you are going to drive or use tools or machines. When you get on a steady dose of opioid, you should be able to drink modest amounts of alcohol without getting any extra unusual effects.

### **Can I take this medicine long term?**

Research has shown that opioids are not beneficial for long-term (chronic) pain and, more importantly, are not safe to take for longer periods of time for chronic pain. They may be used for longer periods to relieve cancer pain.

Opioids can become less effective with time (this is called tolerance) meaning your body has got used to the pain-relieving effect of the medicine. You can also become dependent on opioid medicines. This means that if you stop taking the drug suddenly, or lower the dose too quickly, you can get withdrawal symptoms that include feeling agitated, anxious, shaking or sweating.

Higher doses of opioids have also been linked to problems with your memory and concentration, lower mood and a higher risk of falls and fractures. Although it sounds strange, opioid medicines can actually make your pain worse. The longer you take them and the more you use, the greater risk of your pain getting harder to manage. High doses have been shown not to improve pain levels any more than lower doses. Higher doses can cause more side-effects and long-term health problems.

### **Reviewing Opioid Treatment**

Everyone prescribed opioid medicines long-term should have them reviewed by their healthcare team at regular intervals. This is to make sure that the opioids you are prescribed are still the best option. If this does not happen, ask your pharmacist, nurse or doctor.

### **Reducing your Opioids**

If you have been using opioids for less than a few weeks, you should just be able to stop at the end of your prescription.

If you have been using them long-term then they should be reduced slowly with the aim to stop them completely. When you are living with pain and taking pain medicines regularly, it can be difficult to think how you would manage without them. However, we are learning more all the time about the other health problems caused by these medicines. If you have been taking pain medicines for more than three months and still have pain or are not able to do any more than before, the medicines are not working.

Many people find that after a few months they can take a reduced dose without the pain increasing. Some people can gradually reduce their opioid dose and find that their pain is no worse. As fewer side effects are experienced, quality and enjoyment of life can improve so you are able to do regular activity and exercise. All of this contributes to greater physical fitness and can help manage pain and other symptoms.

Do not stop taking an opioid suddenly because this may cause unpleasant withdrawal side effects. It is important to get the right help and support when you are ready to stop taking your medicine or reduce the dose. Talk to your doctor, nurse or a pharmacist, they will be able to help you to come off your opioid medicine slowly to reduce unpleasant withdrawal side effects.

### **What else can I do to manage my pain?**

If your pain is related to a specific event such as trauma or an operation it should improve as you start to recover.

Pain medicines work best if you combine them with other ways of managing symptoms such as gentle exercise, using relaxation techniques, and getting involved in social activities. Try to set small achievable goals which may have a positive impact on your life and improve your overall health.

**Where can I find more information?**

- NHS website for England: <https://www.nhs.uk/live-well/pain/>
- Northamptonshire General Practice Alliance Chronic Pain website: <https://www.northantsgpalliance.com/chronic-pain/>
- British Pain Society: <https://www.britishpainsociety.org/people-with-pain/patient-publications/>
- Live Well With Pain website: <https://livewellwithpain.co.uk/explore-our-resources/>
- Faculty of Pain Medicine website: <https://fpm.ac.uk/opioids-aware>
- Flippin Pain website: [www.flippinpain.co.uk](http://www.flippinpain.co.uk)
- Painkillers Don't Exist website: <https://painkillersdontexist.com/>
- National Institute for Health and Care Excellence (NICE) <https://www.nice.org.uk/guidance/ng193/informationforpublic>

QR code link to Northamptonshire General Practice Alliance Chronic Pain website:

