TOP TIPS for prescribing opioids at end of life

Use the lowest dose needed to achieve symptom control. Be prepared to adjust the dose up or down according to symptom relief and side effects. Review the patient regularly.

Opioids are good for relief of pain and breathlessness but should not be used for sedation.

Always check conversion doses, especially when using unfamiliar opioids. It is usually helpful to calculate the equivalent oral morphine dose and continue from there.

In opioid naïve patients, start with a subcutaneous syringe pump (SCSP) dose of morphine 10mg/24hrs (use lower doses for elderly, frail patients).

In opioid naïve patients, consider adding in an antiemetic to the SCSP regimen. Nausea and vomiting are common initial undesirable effects of opioids.

For patients already using opioids calculate their equivalent SCSP opioid dose. Consider factoring in an increase if the patient's pain is not controlled.

When adjusting the 24-hour dose of opioid, PRN use should be taken into account; dose increases should not exceed 1/3rd - 1/2 of total dose every 24hrs.

Prescribe a PRN subcutaneous (SC) dose equivalent of up to 1/6th of the 24hr dose. It may be helpful to prescribe a dose range:
e.g. morphine 60mg/24hrs via SCSP,
morphine 5-10mg SC PRN

Clarify permitted frequency of PRN SC opioid dose (generally 2-4 hourly PRN but can be 1 hourly PRN when pain severe, or in the last few days of life).

For patients already using a transdermal opioid patch e.g. Fentanyl, Buprenorphine, it is usual to continue with the patch when starting a syringe pump. The syringe pump enables the addition of easily adjustable doses of opioids/medications.

Do not forget to include the equivalent dose of transdermal patch PLUS the SCSP opioid dose when calculating PRN SC opioid dose:

E.g. Fentanyl patch 25 mcg/hour (approx. 60 – 90 mg oral morphine/24 hours) + SCSP morphine 15 mg/24 hours (approx. 30 mg oral morphine/24 hours) = Total oral morphine 90 – 120 mg/24 hours = total SC morphine 45 – 60 mg/24 hours Therefore, PRN SC morphine dose range = 5 – 10 mg

For patients in the community setting, it may be helpful to prescribe a dose range for the 24hr SCSP regime. Provide clear instructions on indication(s) for increasing the dose with suitable dose increments:

E.g. Morphine 30-50mg/24 hours. "Increase in increments of 5-10mg, depending on PRN use, if pain not controlled. Do not increase more frequently than every 24 hours."

For patients with renal failure please see your local prescribing guidance and/or seek specialist advice

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