

### Managing side effects

Common possible side effects from taking strong painkillers are:  
Constipation (difficulty or pain when passing stools, or passing stools less often). Constipation affects nearly everyone who takes strong opioids. You should usually be given laxatives to relieve constipation. Laxatives work by making the stools looser or stimulating the bowels to work. As they can take time to work, it is important to continue taking them as directed.

Feeling Sick (Nausea) - If you experience feeling sick when starting strong opioids or when the dose is increased, it is likely to only last a short time. If it persists, you may be given anti-sickness medication to help relieve symptoms.

Drowsiness - You may experience mild drowsiness or problems with concentration when starting strong opioids, or when the dose is increased, but it is likely to only last for a short time. It may affect your ability to drive or carry out manual tasks. If the drowsiness or lack of concentration persists, or is severe, the strong opioids may be changed, the dosage reduced or further specialist advice sought.

### Drug Driving Law

A new drug driving law came into force in England and Wales in March 2015. Some medicines included in this new legislation are opioids. If you are taking medicines as directed and your driving is not impaired, then you are not breaking the law. You should continue taking medicine(s) as advised by your doctor or healthcare professional, or according to the patient information leaflet that comes with the medicine. For more information visit [gov.uk/drug-driving-law](http://gov.uk/drug-driving-law)

# Taking Strong Opioids To Treat Pain In Advanced, Progressive Disease

## Patient Information Leaflet

As with all medications, strong opioids should be stored in a safe place out of the reach of children & Vulnerable Adults

Strong opioids, such as morphine, are painkillers that act on the central nervous system to alleviate pain when other types of pain relief do not help. 'Advanced progressive disease' refers to conditions that are likely to get worse over time and for which there is unlikely to be a cure, (such as advanced cancer, heart disease, liver disease, lung disease, kidney disease, HIV and some diseases of the nervous system).

### Common concerns about taking strong opioids

Some people worry that they will become addicted to strong opioids or that there will be unpleasant side effects. This is very unlikely and you will be monitored carefully for side effects. Being offered strong opioids can happen at different stages in the course of a disease and it does not necessarily mean you are close to the end of your life.

### Starting treatment with strong opioids

The first opioid treatment you should be offered is morphine, which can be taken by mouth in tablet form, capsules, liquid or powder. You will be offered one of two types of morphine: Immediate release- this is a short-acting type that you will need to take several times a day.

Sustained release- this can be taken less frequently because it is absorbed slowly by the body over several hours allowing its effects to last longer. When taking sustained release, you should also be offered a supply of immediate-release morphine which you can take as well to help you to manage any breakthrough pain.

As pain control is different for each person, you will be monitored and the pain relief adjusted to find the lowest dose that controls your pain and has the lowest side effects.

### Continuing treatment for your pain

Once the right dose has been found for you that controls your pain, you may then be offered a sustained-release form of morphine. This will need to be taken by mouth to continue your treatment. If you may have already started your treatment with a sustained-release form of morphine, this will continue. If you are able to take your morphine by mouth, then you should not be offered an opioid patch for your continued treatment.

If you have trouble swallowing and are not able to take opioids by mouth, provided that your pain remains steady and does not fluctuate, you may be offered a opioid patch which releases the medication through the skin. Injections may be considered as an alternative if your pain is fluctuating.

### Reviewing pain control and who to contact

When you start taking strong opioids you will be reviewed regularly to monitor your pain control and any side effects. Adjustments in the dose or type of strong opioids is particularly likely at the beginning of treatment. The doctor or nurse who manages your pain should tell you how often you will be reviewed and who to contact if you have any problems. Please inform the doctor or nurse who normally manages your pain if you feel that your pain is not being controlled. If you find that you are taking two or more doses of immediate release morphine in a day, please make sure you inform the doctor or the nurse. If your pain is not well controlled after adjustments, your healthcare professional may ask for advice from a specialist. If you have any further questions, please contact the person responsible for your care. There is a space below to record their details:

Name ..... No .....