

Strong Opioids (painkillers)

Information for cancer and palliative care patients

What are opioids?

Opioids are a group of medicines that have been used for many years to treat pain. They provide pain relief by imitating the body's natural pain relievers. Morphine is the best example of an opioid as it is made from the opium poppy.

Examples of weak opioids

- Codeine
- Dihydrocodeine
- Tramadol

Sometimes they are combined with paracetamol to make them work better. Codeine is available at low doses over the counter within the UK in combination with paracetamol (co-codamol). It is converted to morphine in our bodies, so many people have already been on a low dose of morphine.

Examples of strong opioids

- Morphine
- Oxycodone
- Buprenorphine
- Fentanyl

Opioid medicines come in many forms including tablets, capsules, liquids, skin patches and injections.

When are strong opioids used?

Most people who are prescribed a strong opioid have a lot of pain. This pain can be present for various reasons such as cancer, heart or lung disease, or following an accident or operation. Codeine and other simple pain medicines may not be enough to control the pain, and this is when a strong opioid can be beneficial.

What are the benefits of taking strong opioids?

They may help to reduce your pain or distress and improve your ability to function both physically and socially. They may also allow you to sleep and eat better. By reducing this pain, strong opioids can help you to achieve goals like walking, rehabilitation and being more independent.

Will I become addicted to opioids?

It is very rare for people to become addicted when they are taking opioids for pain relief, even if they take them for a long time.

However, as your body becomes used to the opioid medicine, you may experience symptoms of withdrawal (sweating, muscle cramps, diarrhoea, aching muscles) and the return of your pain if you either, lower the dose too quickly or stop taking it suddenly. If you feel you no longer need a strong opioid, please discuss this with your doctor who will work with you to reduce the dose gradually.

You should not stop taking your opioid medicine except under advice from your doctor.

What are the usual doses of opioids and how should I take them?

It is important to find the most effective dose to relieve your pain. The amount needed to control pain varies from person to person. There is no standard dose of an opioid as pain is a very personal experience. You will usually be advised to start with a low dose and gradually build it up until you find the dose that suits you.

Your doctor, nurse or pharmacist will explain how to take your medication.

- **Fast-acting** opioid is often prescribed as a liquid, tablet or capsule for uncontrolled severe pain. It starts working quickly, after about 15 to 20 minutes, and will wear off after about 3-4 hours. If you get additional pain you can take another dose, as advised.
- **Long-acting** preparations of opioids are used to control **background pain** which is constant and continuous. Doses are taken at regular 12 hours intervals to prevent the pain recurring. These preparations will take a few hours to start reducing pain and are likely to last for up to 12 hours. If the pain is not controlled by this long-acting preparation alone, you can take additional doses of the fast-acting version for any breakthrough pain, as advised.
- **Opioid patches** - **Buprenorphine** and **Fentanyl** are opioids available as patches which release medication through the skin. They are useful for people who cannot swallow normally. Pain relief can last from 3 to 7 days depending on the type of the patch.

Can I take opioids with other medicines?

Yes, opioids do not usually cause problems with your other regular medicines. In fact, it is often prescribed in addition to other pain medicines, such as regular paracetamol or ibuprofen, as they work in different ways to help reduce your pain.

What about side effects?

There are several common side effects with opioids. Some get better after a short time, but others last longer. Your doctor, pharmacist or nurse will be able to advise you how to manage these side effects:

Constipation

Most people taking opioids will have constipation. Your doctor will prescribe a laxative right from the start of opioid administration to overcome this. It is much easier to prevent constipation than to sort it out once it has taken hold.

Sickness or nausea and vomiting

Some people may feel sick when they first start taking an opioid medicine, in most cases it should wear off after a few days. However, if you do feel sick or suffer with migraines or travel sickness, inform your doctor so they can offer you a medicine to stop this.

Drowsiness

You may find you cannot concentrate or that you feel more sleepy than normal when you first start taking an opioid medicine or the dose is increased. This should wear off after a few days. If it does not wear off, please inform your doctor.

Dry mouth

Frequent sips of cool drinks may help if your mouth is dry. Sucking boiled sweets, ice cubes, frozen segments of pineapple and melon, or chewing gum may also help. Medicines are also available to treat a dry mouth by replacing saliva in the form of oral gel and mouth sprays.

Occasionally opioid medicine can cause other side effects such as prolonged sleepiness, muddled thoughts, bad dreams, hallucinations or muscle twitching. If these occur, your doctor may decide to reduce your dose or change your opioid medicine to a different one.

Can I drink alcohol?

Taking alcohol and opioids together may cause sleepiness and reduce your ability to concentrate. When you first start taking opioids, or when your dose is increased, you should be more careful. When you are on a steady dose of opioid, you should be able to drink a modest amount of alcohol (1-2 units per day) without experiencing any extra unusual effects.

When you are taking opioids you should not drink alcohol if you are going to drive or operate machinery.

Can I continue to drive?

It is important to continue to take your medications as prescribed but take note of the following recommendations:

- It is **illegal** to drive with prescribed medication in your body if it impairs your ability to drive.
- There is medical defence for people taking the drugs for medical reasons if their ability to drive **was not** impaired.
- Check the leaflet that comes with your medicine for information on how your medicine may affect your driving ability.
- Do not drive while taking this medicine until you know how it affects you (especially just after starting or changing the dose of the medicine), this could take weeks.
- Do not drive if you feel sleepy, dizzy, unable to concentrate or make decisions, or if you have blurred or double vision.

For further information see the following website: www.gov.uk/drug-driving-law

How do I store opioids?

You should store opioids safely, in a cool, dark place. Make sure it is well out of reach of children, vulnerable adults and pets. It is important that only **YOU** take the opioids prescribed for your pain. Opioid medicines should be kept in their original containers and clearly labelled.

What should I do with unused opioid medicines?

Do not flush them down a toilet or throw in the rubbish bin. Fold used patches in half and return them with any unused liquids or tablets to a community pharmacist for safe disposal.

How do I get further supplies of my medicines?

You will have been given a two weeks' supply for pain medicine that you are taking regularly. Any medicines which you are taking for breakthrough pain may run out sooner. You can get further supplies of these medicines from your GP. Your GP and local pharmacist will also be able to provide help and advice about your medicines.

Useful contact details

East and North Hertfordshire Teaching NHS Trust:

- Website www.enherts-tr.nhs.uk
- Telephone 01438 314333

Pharmacy Dedicated Patient Helpline:

- Telephone: 01438 286150 (Monday to Friday, 9am – 12 noon and 2pm - 4pm)
- Email - medinfo.entr@nhs.net

Leaflet information

You can request this information in a different format or another language; please speak to your doctor or nurse.

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