


Opioid 10 min overview!

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Something
for everyone

- Whatever our role we need to understand opioids, the advantages, side effects, cognitive impact, social and family impact
 - Doctor
 - Nurse
 - OT/Physio
 - Chaplain/ spiritual care
 - Aboriginal health worker
 - Pharmacist
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Opioids in Palliative care setting

- FOR DOCS.....
- Weak / strong opioid (WHO ladder)
- Typical vs atypical (eg tapentadol)
- 4 different classes (switching, rotation)
- Work by binding to receptors (alpha, kappa, delta and NOP)
- Equi analgesic doses
- Pre and post synaptic receptors
- Interactions
- Legal issues (prescribing , driving)

Opioid Essentials

- FOR THE TEAM.....
- Availability
- Tolerability
- Side effects , from common to rare
 - nausea, vomiting, constipation
 - drowsiness,
 - urinary retention
 - itch
 - myoclonus, allodynia, hyperalgesia,
 - hallucinations, delirium
 - respiratory depression

Patient education / explanation



Opioids

- Are opioids the right drug for this patient with this pain (s)
- Which drug
- What dose
- Regular and or PRN
- What route
- Are they available (current shortages)
- Can the patient afford them? Get the? Understand how to take them?

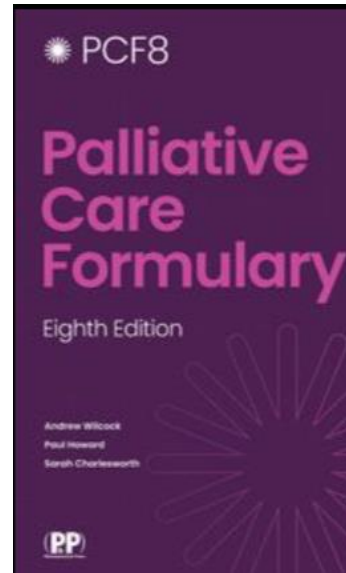
Lets get
practical

- Pain is a common symptom. Often mixed type (cancer, treatment, pre existing)
- Needs management alongside other symptoms
- Over 90% patients use opioids
 - . Many need adjuvants
 - . All need support
- Shared understanding and plan of care
- Shared language (SAS , karnofsky)

Opioids in practice, can only learn from cases

Resources

- Care Search - caresearch.com.au
- Therapeutic guidelines - tgldcdp.tg.org.au
- Palliative Care Formulary (PCF8) Eighth Edition.



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