## OPIOID MANAGER SWITCHING OPIOIDS



- Opioid withdrawal symptoms are unpleasant, but not life-threatening. What is life-threatening with opioids is overdose. So remember, it is safer to underdose. Be careful during pregnancy, because severe acute withdrawal has been associated with premature labour and spontanous abortion.
- After switching, it is important to warn the patient (and relative or friends) about signs of overdose: slurred or drawling speech, • emotional lability, ataxia, "nodding off" during conversation or activity.
- Consider a 3-day "tolerance check:" contact the patient 3 days after starting the new opioid to check for signs of over-sedation and to ensure that pain relief is at least comparable to the pre-switch treatment.
- Patients at higher risk of overdose include: elderly, on benzodiazepines, renal or hepatic impairment, COPD, sleep apnea, sleep disorders and cognitive impaired.
- These doses are approximations due to inter-individual variation.

The form below is designed to guide the provider in switching from one opioid to another using the table of morphine equivalent suggested by the guideline. A copy of the completed form may be given to the patient and should be sent to the pharmacist.

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## **Morphine Equivalence Table**

Opioid (Oral Dose)		Equivalent Doses (mg)	Conversion to MEQ
Morphine		30	1
Codeine		200	0.15
Oxycodone		20	1.5
Hydromorphone		6	5
Meperidine		300	0.1
Methadone & Tramadol		Dose Equivalents unreliable	
Transdermal fentanyl	60 - 134 mg morphine = 25 mcg/h 135 - 179 mg = 37 mcg/h 180 - 224 mg = 50 mcg/h 225 - 269 mg = 62 mcg/h 270 - 314 mg = 75 mcg/h 315 - 359 mg = 87 mcg/h 360 - 404 mg = 100 mcg/h		

**Switching Opioids:** 

If previous opioid dose was:

High

Moderate or low

Then, SUGGESTED new opioid dose is:

50% or less of previous opioid

(converted to morphine equivalent)

60-75% of the previous opioid

(converted to morphine equivalent)

	Switching Opioid Form
Patient name:	Today's date:////
	to
Start switching on Monday://	
	·····/ ····· (IIIII/ du/ yy)
Current opioid(s) regimen:	
Current total daily dose of opioid:	
Switching from current opioid to morphine equivalent:	······/ uuy
Morphine to morphine: multiply	by 1
Oxycodone to morphine: multiply	
Hydromorphone to morphine: multiply	
Current morphine equivalence dose:	
Proportion of the initial daily dose that will be switched	d to the new opioid: ( ) 50% ( ) 60% ( ) 75% ( ) other:
Total morphine equivalents that will be switched to the	new regimen:/day
Switching from morphine equivalent to the new opioid	
Morphine equivalent to morphine:	
Morphine equivalent to oxycodone:	multiply by 0.667
Morphine equivalent to hydromorphone:	multiply by 0.2
From morphine equivalent to the new opioid: The tota	Il daily dose of the new opioid is:/day
New opioid regimen:	
• Opioid name, dose and frequency:	
• Opioid name, dose and frequency:	
Comments:	
For questions, please call Dr	Phone number: ()

To access the Canadian Guideline for Safe and Effective Use of Opioids for Non Chronic Cancer Pain and to download the Opioid Manager visit http://nationalpaincentre.mcmaster.ca/opioid/