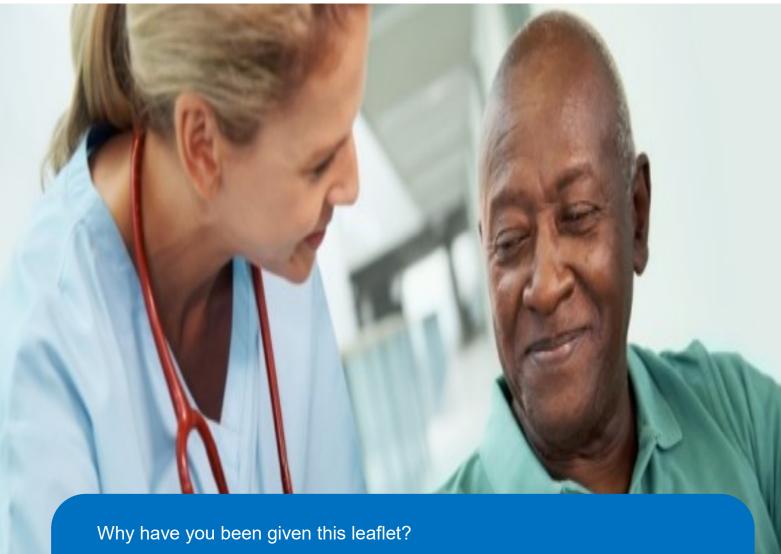


What you need to know about Reducing and stopping opioids



- You are taking opioids
- Your doctor has suggested you reduce the opioids you take
- To let you know about possible side effects of opioids
- To tell you about tolerance, and dependence on opioids
- To help you know what can help you while reducing your opioids

Why stop taking opioids?

Opioids like morphine, oxycodone or fentanyl are very good painkillers for short-term pain after surgery or after an accident (such as a broken bone). This short term pain is known as acute pain and lasts days or weeks.

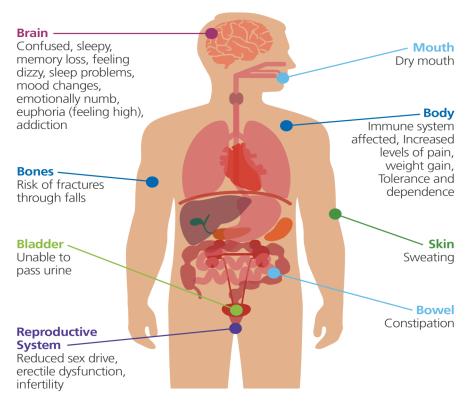
We used to think that opioids were also useful for people with longer-lasting pain known as chronic pain which goes on for months or years. We now know that opioids don't help long term pain and, more importantly, are not safe to take for longer periods of time. Doing this can cause side effects, addiction or early death.

Oxycodone and fentanyl are stronger drugs than morphine. If you are taking these medicines, we can work out how much the same dose would be if converted to morphine. We call this the 'morphine equivalent' dose.

The British Pain Society recommends that people with chronic pain should take no more than 120mg of morphine equivalent a day. This includes all opioid tablets, capsules or liquids you take or patches you use.

Side effects of opioids

When you take an opioid medication, it can act on many different parts of your body at the same time.



If you take opioids for a long time, they can start to make you **more** sensitive to pain. You may notice that sometimes a simple touch, like clothes rubbing on your skin, can feel painful, while something you'd expect to hurt a bit can feel extremely painful. So, rather than help reduce pain, the opioids start to make your pain systems more sensitive.

Stopping opioids completely will reverse these effects, so you may find that your pain gets better once you've stopped taking opioids.

Tolerance, dependence and addiction

Tolerance is when opioids become less effective over time, as your body has got used to the pain-relieving effect. Your body can also become dependent on opioids, so that if you stop taking them suddenly you get symptoms of withdrawal. Occasionally people in pain can become addicted to opioids. You might crave the medicine or carry on taking it even when it has a negative effect on your physical or mental health.

Driving and opioids

In March 2015, a new drug driving law was introduced. It introduced a limit for morphine (as well as other drugs), above which you shouldn't drive. The maximum blood level is 80mcg/l, which is approximately 200mg of morphine equivalent a day. Tests showed that people with blood levels of morphine above this can have slower reaction and decision times, leading to problems judging distance and their own speed.

Driving ability gets even worse if you are also taking other drugs that make you feel sleepy, like diazepam, amitriptyline or gabapentin, among others. Other drugs, like codeine or tramadol, or some over the counter medication, can also affect your ability to drive safely. Whatever drugs you are taking, you must never drive if you don't feel safe to do so.

What can help me while I'm reducing my opioids?

We shall use a plan that reduces your opioid doses slowly. This will help to reduce the chance of you developing feelings of withdrawal or, if you do, they will be mild.

As you reduce your opioids you may experience withdrawal symptoms, such as:

- feeling shivery or sweaty
- diarrhoea
- or stomach cramps

If you find you are more irritable than usual or may feel more anxious or depressed, speak to your GP.

These symptoms shouldn't last long, and we suggest that you use **distraction** or **relaxation techniques** to help during this time.

Music, books or films can be useful for distraction, as well as getting out and keeping active, even if it is just walking. Having nice snacks or drinks may help, if you lose your appetite and can stop you from becoming dehydrated.

The most important thing you will need is support from family and friends, who should understand that this is an important but possibly difficult thing for you to do. Even after you stop all your opioids it can take 4-6 months to feel back to normal, so you will still need their support during this time.

Health Care Professionals supporting you such as your GP, Practice based Pharmacist, Nurse or Social Prescriber can discuss long term pain management strategies with you, including self-care resources. See these on the next page.

Use this space to write down any questions you want to ask your healthcare professional about your medication.

There are many resources which can help you understand and manage your pain. These include:

The Pain Toolkit: This gives practical advice and techniques to help manage pain. *Website*: https://www.paintoolkit.org/

Live Well with Pain: This site offers resources for patients exploring medication use, medication reviews, behaviour change, opioid prescribing. *Website*: www.livewellwithpain.co.uk

Flippin' Pain: This is a public health campaign with a goal to change the way we think about, talk about and treat persistent pain. Website contains includes patient leaflets, videos, podcasts, Ted Talks, booklets for both patients and clinicians. *Website*: https://www.flippinpain.co.uk/

British Pain Society: Helpful information section for patients with pain conditions, and details of various support groups.

Website: www.britishpainsociety.org

"Brainman stops his opioids" - Animated video providing patient information about strategies to help reduce opioids *Website*: www.youtube.com/watch? v=MI1myFQPdCE

Action for Happiness - Charity organisation with people taking action to create a happier and kinder world, together though: Tips and hints, resources, podcasts, events. *Website:* www.actionforhappines.org

Apps:

Mindfulness: www.headspace.com/headspace-meditation-app
Active walking: https://www.nhs.uk/better-health/#apps-and-tools

Mood diary: https://itunes.apple.com/gb/app/wellmind/id918138339?mt=

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