

## Why does my GP want to reduce my pain killers?

The idea of reducing and stopping pain killers may feel illogical, however, this leaflet will help to explain why it may be beneficial. We are referring to opioid painkillers used for chronic, non-cancer pain.

### What are opioids?

Opioid drugs include:

- Buprenorphine (*patches e.g. Butrans®*, *Butec®*, *Reletrans®*, *Sevodyne®*, *sublingual tablets e.g. Temgesic®*)
- Codeine (*e.g. co-codamol*, *Zapain®*, *Kapake®*, *Solpadol®*)
- Dihydrocodeine (*e.g. co-dydramol®*, *DHC Continus®*)
- Fentanyl (*patches e.g. Durogesic®*, *Fencino®*, *Matrifen®*, *lozenges*, *sublingual or buccal tablets*)
- Morphine (*MST®*, *Zomorph®*, *Sevredol®*, *Oromorph®*)
- Oxycodone (*Oxycontin®*, *Oxynorm®*, *Longtec®*, *Shortec®*)
- Tramadol (*Zydol®*, *Tramulief SR*, *Zamadol®*)
- Diamorphine (*injection only*)

### 8 reasons why reducing opioids might be beneficial for me?

1. Recent evidence questions the benefits of opioid when long term for pain. They aren't actually very effective when taken for more than a few months.
2. When patients in pain on opioids are compared with patients in pain who are not on opioids, those on the drugs tend to have more pain, a worse quality of life, more side effects and are less likely to be in employment.
3. Everyone who takes opioids long term will become tolerant to them. This means that increasing doses are required for the same effect. If think your opioid is working because you have increased pain when you miss a dose, you may in fact be experiencing withdrawal symptoms. Often pain is no worse after a slow reduction and eventually stopping opioids – sometimes it is improved. Lowering the dose is likely to make you feel better in yourself too.
4. Reducing opioids may reduce pain! This is more common when very high doses of opioids are taken as they can sensitise the pain nerves. This is the reason why some patients end up on high doses but are still in pain.
5. Opioids can cause constipation and abdominal pain.
6. Opioids can affect hormones which can result in you feeling miserable or lead to reduced sexual drive or function.
7. Opioids can impair your driving. It is against the law to drive if you have certain drugs above a specific level in your blood, including those on available prescription. See <https://www.gov.uk/drug-driving-law>
8. Opioids are associated with an increased risk of death, particularly at high doses and when combined with some other medications such benzodiazepines (i.e. diazepam, temazepam) and / or alcohol.

## ***How can I reduce my opioids?***

**Discuss a tapering programme with your GP.** Slow, gradual reductions are required to reduce withdrawal symptoms from the opioids. Your dose may be able to be reduced by 10% every 1-2 weeks. A slower reduction may be required if you have been taking opioids for several years.

Your opioid medication should be consolidated in to one single modified release preparation which is taken twice day. **'When required' doses of opioids should be avoided.**

**Do not stop your opioids suddenly.** This will result in more severe withdrawal symptoms.

Do enlist support from your family and friends.

Several **self-management resources** are available on the internet. These can help with understanding and managing your pain:

- **Live Well with pain:** Information and worksheets <http://livewellwithpain.co.uk/resources-for-your-patients/information-and-worksheets/> Video and Audio resources <http://livewellwithpain.co.uk/resources-for-your-patients/information-and-worksheets/>
- **The Pain Tool Kit:** Series of 12 videos to help patient learn and understand pain self-management <https://www.paintoolkit.org/tools>
- **The Retrain Pain Foundation:** 8 lessons on understanding pain <https://www.retrainpain.org/>

## ***What should I expect?***

You may experience increased pain as the opioids are withdrawn. This should subside within 1 -2 weeks and is lessened by tapering your opioids more slowly.

You may experience withdrawal symptoms. These can be flu-like i.e. sweats, chills, headache, joint and muscle pains. Diarrhoea, fatigue, anxiety and sleep disturbance can also occur with stopping opioids. Withdrawal symptoms can be reduced by slowing the tapering rate or holding the dose. Ensure you inform your GP and agree a plan to pause or reduce the taper rate.

Do not attempt to take a higher dose of opioid once tapering has started. This may be dangerous as your tolerance of the opioid will be reduced making you more susceptible to overdose.

Ensure you are reviewed by the same GP each time (either by telephone or by attending the surgery) so they can provide you with continued support with your dose reductions.

It is ok to take a break in the tapering, but continue to try and move forward after the pause. **Remember that the long term goal is improved pain control and quality of life while reducing potential harms of treatment.**