

Managing Opioid Side Effects

Nausea & Vomiting

- Reassure that tolerance usually develops in <1-2 wks
- Titrate opioid dose slowly & consider short-term prochlorperazine 5-10mg q6h PRN,
haloperidol 0.5-1mg BID PRN, metoclopramide 5-10mg q6h PRN, domperidone 5-10mg
- TID AC (transdermal scopolomine for dizziness & secretions)
prophylactic use if patient gives history of N&V
- May consider other routes of administration (e.g. patch)

Urticaria, Pruritis

- Reassure that tolerance usually develops (true allergy rare)
- Utilize adjuvant therapy that may allow ↓ dose
- Premedicate with antihistamine e.g. diphenhydramine 25-50mg (ranitidine 150mg HS or q12h)
- Switch opioids

Sweating

- Glycopyrrolate, scopolamine or clonidine
- **Drowsy, Mental confusion**
- Reassure that tolerance usually develops in a few days
- ↓ dose/use of any non-essential CNS depressants
- ↓ opioid dose; hold opioid for 1-2 doses as necessary
- Consider giving lower dose more frequently; or switch to alternate opioid (at ~25% lower dose-equivalent)

Dry Mouth

- Regular sips of water, sugarless gum etc.
- Consider saliva substitute (e.g. oral balance gel)

Constipation

- Diet: encourage fibre (bran 1 cup All BranR), flax 1 tablespoon seeds, prunes/prune juice
1 cup, water 4-6 cups, & a balanced diet
- Exercise: regular activity as tolerated

Step 1 Oral Laxatives

- Senna 1-2 tablets at HS up to 2 BID (max ~8 tabs/day) or Bisacodyl 1-2 tablets at HS (max ~8 tabs/day) (Docusate 1 BID -stool softener only; minimal effect!)
- MOM 30-60ml OD (CI if renal failure); Sorbitol 70% 30ml OD-QID; Lactulose 15ml BID, max 30ml TID

Step 2 Laxatives

- May combine step 1 agents; if no bowel movement: Mg Citrate, Fleet enema, PegLyte or GoLyte 250ml OD-BID PRN

Step 3

- Consult physician if several days (96+hrs), pain, severe bloating. (temporarily ↓ opioids)

Opioid Induced Neurotoxicity Syndrome

- CNS excitation (myoclonus, agitation, delirium)
- Treatment includes rehydration, checking renal fx, taper/switch opioid; benzodiazepines

Other long-term opioids concerns

- Development of tolerance/hyperalgesia; hormonal changes: ↓plasma cortisol levels, ↑prolactin, ↓LH, FSH & testosterone 4; suppression of immune function