

Morphine

Information leaflet



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There are many myths about painkillers, especially strong ones such as morphine. These can often cause fears and worries and may lead to pain not being controlled. It can help to know some of the facts about painkilling drugs such as Morphine.

'Opioid' is a word used to describe some strong pain relief medication, for example Morphine. This leaflet explains what opioids are and what we think you may want to know about them. Our leaflet does not replace conversations with your doctor, nurse or pharmacist but reading it may help you decide what questions you want to ask.

1. WHAT IS MORPHINE?

Morphine is a strong painkiller and when used correctly with the right dosage there is no evidence that they either shorten or prolong life. It works very well on many types of pain, although it is commonly associated with cancer pain. It can sometimes be used for controlling feelings of breathlessness.

2. HOW IS MORPHINE TAKEN?

Your pain relief may include both slow acting and fast acting Morphine

[i] Long acting preparations. These need to be taken regularly.

For example Zomorph (Morphine). It comes in a variety of strengths and because they last for 12 hours they need to be taken at 12 hourly intervals, e.g. 9.00am and 9.00pm or 10.00am and 10.00pm. It is not suitable for any sudden pain in between these times.

[ii] Short acting preparations. To be taken as required

For example Oramorph (liquid morphine) and Sevredol (fast acting Morphine tablet). A variety of strengths may be prescribed. They start to work in about 20-30 minutes and last approximately 4 hours. Fast acting preparations are suitable for sudden pain, that occurs despite your regular painkillers, known as 'breakthrough pain'.

3. IS MORPHINE JUST USED IN THE LAST STAGES OF LIFE?

No. It is widely used for pain control, not only those who are very ill, but also those who still have a lot of living to do. It may be used after an accident or operation. Some people remain on Morphine for a long time as it helps them with their everyday life.

4. DOES IT WORK FOR ALL PAIN?

No. Not all pain is helped by Morphine, your doctor will discuss this with you. It may be necessary to take other painkillers at the same time that work in a different way e.g. paracetamol.

5. WILL I NEED BIGGER AND BIGGER DOSES TO CONTROL THE PAIN?

Not necessarily. However, many people do need to increase the dose from time to time particularly at the beginning of treatment in order to work out the right level of painkiller for you.



Further increases only happen when the pain is getting worse. It does not mean that the Morphine is losing its effect.

6. WILL I BECOME ADDICTED TO MORPHINE?

No. Taking Morphine for pain will not make you an addict. If another treatment is possible that takes the pain away we can often reduce or stop Morphine but this should be done in a controlled way. You should not stop taking them without discussing this with your doctor or nurse.

7. WHAT SIDE EFFECTS MAY I GET?

[i] **Constipation.** It causes constipation in most people. Eating more fruit, vegetables, brown bread, bran based cereals and drinking more fluid may help but most people will still need a regular laxative.

[ii] **Feeling sick or vomiting.** This can happen when you first take it but it usually only lasts a few days. Your doctor can prescribe anti sickness medication if necessary.

[iii] **Drowsiness.** When first starting or when increasing the dose this may occur. Our bodies usually adapt after a day or two. If this happens you should not drive or operate dangerous machinery.

Less common side effects include unsteadiness, confusion, sweating, blurred vision and a dry mouth.

PRECAUTIONS

If you experience any of the following symptoms you should seek prompt medical advice:

- Your pain gets worse and is not controlled by your current medication
- Excessive drowsiness
- You are feeling very sickly and vomiting
- If you feel confused or muddled
- If you experience bad dreams or hallucinations
- If you feel restless or jumpy

WHO TO CONTACT

Local GP surgery, Out of Hours emergency care, In an emergency contact 999

8. WHAT ABOUT DRIVING?

Check the leaflet that comes with your medicines for information on how your medicines may affect your ability to drive. Do not drive after taking your medicines until you know how they affect you. Do not drive if you feel drowsy, dizzy, unable to concentrate or make decisions, or if you have blurred or double vision

If you are taking your medicine in accordance with the advice of a healthcare professional and/or as printed in the accompanying leaflet and your driving is not impaired, then you are not breaking the law. It may help to discuss this with your doctor, specialist nurse or pharmacist but **Remember** – ultimately the risk lies with you. It is an offence to drive whilst your ability is impaired, if in doubt, you should not drive. It is suggested that you carry a copy of your prescription or a used medicine packet when driving.

For more information go to www.gov.uk/drug-driving-law

9. CAN I DRINK ALCOHOL?

Yes. It is safe to drink alcohol in moderation. A combination of Morphine and alcohol may make you feel sleepy or have a greater effect than usual. It is sensible to drink less than usual until you know what sort of effect it has on you.

10. IS THERE A MAXIMUM DOSE?

No. Firstly, it is not inevitable that pain continues to get worse but if it does, Morphine is unusual in that there is no maximum dose. If it is taken for pain as prescribed the dose can be increased gradually to match your pain. People can be on very big doses of morphine for a long time with no significant problems.

11. WHAT ABOUT MORPHINE FOR BREATHLESSNESS?

If there is no obvious treatable cause of breathlessness there are several ways in which breathing can be made easier, such as low dose Morphine. There are also other medicines which may help.

12. WHAT IF THESE DRUGS WORK FOR THE PAIN BUT HAVE A LOT OF SIDE EFFECTS?

Some of the side effects can be managed, however there are a number of other medications available, similar to Morphine. Your doctor may suggest changing to one of the other ones.

13. HOW DO I STORE MORPHINE?

You should store Morphine in a cool, dark place in their original container. Make sure it is well out of reach of children, vulnerable adults and pets.

Please return any unused medication to the pharmacy.

14. TAKING MORPHINE ABROAD ON HOLIDAY?

Please consult your GP as you may require a letter.

15. PRESCRIPTIONS

You should order supplies from your GP to make sure you do not run out.

If you would like this factsheet in another language or format, for example Braille, large print or audio, please call:

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Or write to Engagement and Communications
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