

## **OPIOID CONSENT AND AGREEMENT**

### ***TREATMENT OF CHRONIC NON-CANCER PAIN WITH OPIOID ANALGESICS (MORPHINE-LIKE PAIN KILLERS).***

Some pain conditions are very difficult to treat, and may lead to significant loss of function and quality of life. Your specialist has indicated that there may be a place for prescribing strong pain killers to help you manage your pain and gain improved function. As these pain medications have important side effects they need to be prescribed carefully. The usual format is to prescribe medications in increasing doses until either you get side effects or reach a plateau in pain levels or function. This is done over a trial period of between 4 and 8 weeks. During this time you will be reviewed for changes in pain scores and function. You will also be assessed for side effects, or other activities that may concern your prescribing doctor. If your progress is significant (e.g. a greater than 30% reduction in pain scores or greater than 30% increase in activity) the medications may be continued. However if there is little benefit the trial will be deemed to be negative and you will have your medications reduced and stopped. These agents will need ongoing review.

These two pages give you some information about the medicines used and spells out both what you can expect when a Pain Clinic doctor recommends opioids and what the Pain Clinic doctor expects from you.

Taking opioids for pain release is a serious step because:

They may not work – Usually a trial of about four to eight weeks on the medicine is needed to know if they are going to be helpful. You may need to see your GP frequently at first to identify how the medications are affecting you.

There are risks involved –The side effects you may experience include:

- increased sleepiness, especially if taken with other medicines or alcohol. These should be reviewed with your GP or specialist. Deaths have occurred in patients who have not consulted their doctors and had important drug and alcohol interactions.
- breathing too slowly – marked sleepiness always occurs first; especially bad if you have obstructive sleep apnoea.
- constipation, itching, sweating, feeling sick, vomiting and poor appetite;
- physical dependence, in that stopping the medicine suddenly, will cause a withdrawal reaction;
- physical dependence in the unborn child of a pregnant woman taking the medicine;
- tolerance, which means you need more of the medicine to get the same effect;

- problems with supply of medicine when travelling away from home;
- addiction, which means you lose control of “when and why” you are taking the medicine; you will get cravings, continued use despite harm, loss of control and compulsive use of these medications.
- being robbed or forced to supply the medicine to others;
- being tempted to sell the medicine;

While the dose is being adjusted or if you feel drowsy, you should not drive or operate heavy machinery. Stopping this drug or altering the dose needs to be done carefully with a doctor’s supervision. Most people do not have problems, and most problems can be dealt with quite easily.

In general women should avoid becoming pregnant while taking opioids. Please tell us if you plan to get pregnant.

Except for your close family, and your doctor(s), don’t tell people you are taking opioids and those you do tell should keep it to themselves. This is for your own protection against robbery and assault.

Prescribing these medicines well needs trust, honesty and good doctor-patient communication.

**The Pain Clinic Doctor is expected to:**

- to do his or her best to describe the role of opioids safely and effectively and outline the role in your pain condition.
- outline the prescribing process – risk assessment for possible adverse drug taking behaviour, defining the role and importance of single prescriber, single pharmacy, role of trial period, stopping treatment plan and ongoing review.
- Provide documentation to both your GP and yourself for the rationale and plan for opioid prescribing
- to support your prescribing doctor- usually your general practitioner; the GP will complete the Pain Contract, prescribe in an appropriate professional manner, comprehensively document assessments and organise random urine testing .

There are some important conditions for you. These are to reduce the risks to you and to society.

**We expect you:**

- to take the medication as prescribed;
- to get all prescriptions for opioids from one doctor only
- to take all your prescriptions to the same pharmacy and let your GP know which pharmacy this is;
- to let the Pain Clinic know if you change your GP;
- to keep the Pain Clinic and GP appointments;
- to discuss with the Pain Clinic Doctor and your GP any plans for travel away from home for long enough to need to get your medicines from another Pharmacy;

- to be aware that the Pain Clinic may be in touch with the Ministry of Health, National Drug Database, or Police if there is any evidence for prescription tampering or drug laundering.
- if you have ever had a “drug problem” to tell the Pain Clinic Doctor before signing this agreement. An old “drug problem” does not mean that you can’t have opioids for pain relief. It does put you at increased risk of developing another “drug problem”. This includes the sale, illegal possession, diversion or transport of controlled substances such as painkillers, sleeping pills or nerve pills. The Pain Clinic must discuss such information with the drug dependency service and the Medical Officer of Health/Medicines Control Officer but it will otherwise remain confidential;
- to understand that no allowance will be made for lost prescriptions or medicines;
- to stop taking the opioids if the Pain Clinic Doctor asks you to. This will be done by gradually reducing the dose and will happen for any of the following reasons,
  - ◊ you develop side effects that are significant in the view of the doctors involve,
  - ◊ you develop rapid tolerance or loss of effect from this treatment,
  - ◊ you become less active because of side effects of the opioids,
  - ◊ you break any of the terms of this agreement,
  - ◊ you obtain opioids from sources other than the doctor agreed upon,
  - ◊ you supply, sell or otherwise misuse the medicine.

I have read this agreement. I understand it and have had all my questions answered to my satisfaction. I consent to the use of opioids under the terms of this agreement.

**Signed (patient)..... dated.....**

**Signed (doctor)..... dated.....**