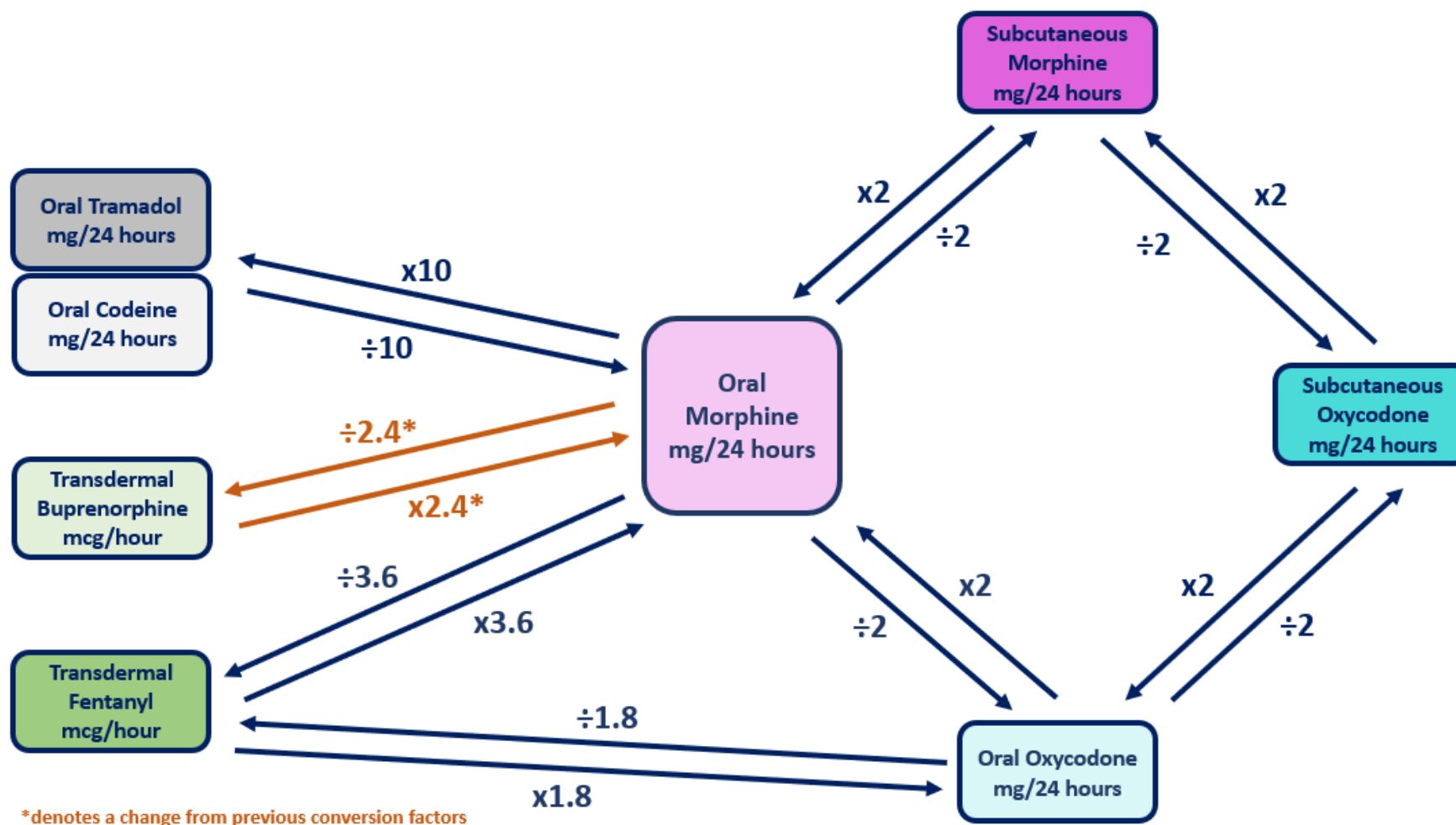


FACTSHEET: OPIOID ANALGESIA

Guide to drug conversions at The Kirkwood

- All conversions are approximate and conversions at higher doses should be discussed with a consultant in palliative medicine
- PRN medication should be prescribed at 1/6th of the total daily dose of regular medication
- Diamorphine, Alfentanil, Methadone, Abstral, and Tapentadol (Palexia) should only be used on specialist advice



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ORAL MORPHINE			ORAL OXYCODONE			SUBCUTANEOUS MORPHINE		SUBCUTANEOUS OXYCODONE		TRANSDERMAL BUPRENORPHINE	TRANSDERMAL FENTANYL
4hr dose (mg)	12hr MR dose (mg)	24hr total dose (mg)	4hr dose (mg)	12hr MR dose (mg)	24hr total dose (mg)	4hr dose (mg)	24hr total dose (mg)	4hr dose (mg)	24hr total dose (mg)	Patch Strength (microgram/hr)	Patch Strength (microgram/hr)
2.5	10	20	1-2.5	5	10	1-2.5	10	1	5	5-10	-
5	15	30	2.5	10	20	1-2.5	15	1-2.5	10	10-15	12
10	30	60	5	15	30	5	30	2.5	15	25	12-25
15	45	90	7.5-10	25	50	7.5	45	2.5-5	25	35*	25
20	60	120	10	30	60	10	60	5	30	52.5*	37
30	90	180	15	45	90	15	90	7.5	45	70*	50
40	120	240	20	60	120	20	120	10	60	-	75
50	150	300	25	75	150	25	150	12.5	75	-	75-100
60	180	360	30	90	180	30	180	15	90	-	100
70	210	420	35	100	200	35	210	17.5	105	-	125
80	240	480	40	120	240	40	240	20	120	-	150
90	270	540	45	135	270	45	270	22.5	135	-	150
100	300	600	50	150	300	50	300	25	150	-	175

*Single patches > 35mcg/hr require a 3-4 day change rather than a 7-day change schedule, depending on the brand/manufacturer. Consider conversion to Fentanyl