### What is oxycodone?

Oxycodone belongs to the group of medications called opioids. Oxycodone is a strong opioid. Codeine and tramadol are weak opioids. Oxycodone is used to help manage severe pain if other pain relief has not helped. It is usually taken with regular Paracetamol.

#### How is oxycodone taken

Oxycodone is available as;

#### A long acting modified release (m/r) tablet - Longtec®

- Help control chronic pain
- Not for sudden (breakthrough) pain in between regular doses
- Taken twice a day, e.g. 8am and 8pm
- Should be swallowed whole with water
- Come in a variety of strengths
- A usual starting dose is 5-10mg twice a day

#### A short (faster) acting capsule or liquid. - Shortec®

- Starts to work within 30-60 minutes and lasts for up to 4 hours
- More suitable for sudden (breakthrough) pain
- A usual starting dose is 5mg every 4 to 6 hours
- Tell your doctor, pharmacist or pain specialist if you take more than 2 3 doses of short acting oxycodone in a day

## Warning

- Do not take more medication than advised
- Do not increase the dose of medicines without medical advice
- Doing so may cause severe drowsiness or breathing problems

## Are there any side effects?

All medicines can cause side effect but not everyone will get them. A full list is in the patient information sheet with your prescription.

Common side effects are feeling sick, constipation, confusion, drowsiness and occasionally vomiting.

If Oxycodone makes you feel drowsy you should avoid driving or operating machinery. It is a criminal offence to drive a vehicle whilst unsafe due to medication use. This might be worse when you start the tablets and each time your dose goes up. Alcohol may make the drowsiness worse and should be avoided where possible.

Less common side effects are itching, sweating, dry mouth, headache, rash or slow breathing. Inform your doctor, pharmacist or pain specialist if you experience any of these side effects.

### Long term use of opioids

We are becoming more aware of the risks of taking opioids long term. They can affect your hormone system, immune system and bone mass. They may also cause 'hyperalgesia' where you may feel an increase in all-over pain.

Opioids have the potential to cause tolerance, dependence and addiction, although this is rare when taken as prescribed for chronic pain. This is more likely if there has been dependency on other drugs, alcohol or nicotine.

If you think you are having any of these side-effects or if you have any worries about them, please discuss these with your doctor, pharmacist or pain specialist.

## How long should I stay on oxycodone?

When oxycodone is used to treat chronic pain there can be pain relief initially. There may be little or no benefit in the long term. If you have been taking oxycodone for a long time a gradual reduction may be tried to see if you still need this medicine.

## How do I reduce the dose of oxycodone?

Do not suddenly stop oxycodone. A dose reduction plan can be discussed and agreed with your doctor, pharmacist or pain specialist. You may need different strengths of your medication to do this.

A reduction of 5-10mg of your total daily dosage of oxycodone is often recommended. The dose should only be reduced every 1 or 2 weeks. This process can be repeated until the opioid is withdrawn.

## Medication in chronic pain

The benefit from taking medication should always be more than any side–effects you may have. Only **you** 

- know how bad your pain is
- are able to say if your medication is helping
- know what side effects you are having

It may take a few weeks or several trials of different medications to find the best combination for you and your pain. It may help to keep a diary of your pain and other symptoms. Side effects often become less once you have been on a medicine for a few days.

Please read the patient information sheet given with each medication. It will give you more information about the medicine and any side effects.

You can discuss your pain medication with your doctor, pharmacist or pain specialist. They can give you advice on which pain medicines may help and they can help you find the best way to take your medicines. They can advise you on putting your dose up safely if your pain is worse and on taking less medication safely when your pain is less.

If your medicine is not helping you may not need to take it. Please talk to your doctor or pharmacist first. Some pain medicines should not be stopped suddenly.

Do not share or take other peoples medication. Always advise your doctor, pharmacist or pain specialist about any other medication or products you are taking for chronic pain including things bought from the pharmacy, herbal supplements or non- prescribed medicines.

#### Understanding how your medications work may help you to get the best pain relief from it with the least side-effects.

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# Oxycodone

## **Patient Information Leaflet**



NHS Fife provides accessible communication in a variety of formats including for people who are speakers of community languages, who require Easy Read versions, who speak BSL, read Braille or use Audio formats.

NHS Fife SMS text service number 07805800005 is available for people who have a hearing or speech impairment.

To find out more about accessible formats contact: <u>fife-UHB.EqualityandHumanRights@nhs.net</u> or phone 01592 729130