

## Appendix 19 – Preparation for Dose Reduction

Factors in deciding whether to wean opioids, and how far to reduce the dose, include:

- Evidence that opioids are not helping – patient's complaints of pain; patient's function; reports from patient's family or associates
- Risk of side effects or complications of opioids
- Risk of drug theft or diversion
- Patient's ability to cope with the effects of dose reduction
- Risk of patient procuring more dangerous opioids from alternative sources
- Physical co-morbidities
- Mental health co-morbidities including significant emotional trauma

Before weaning discuss the following with the patient:

- Explain the rationale for stopping opioids including the potential benefits of opioid reduction (avoidance of long term harms and improvement in ability to engage in self-management strategies)
- agreed outcomes of opioid tapering
- monitoring of pain during taper
- symptoms and signs of opioid withdrawal
- choice of opioid reduction scheme and timing of weaning steps
- incremental taper of existing drug
- defining the role of drug and alcohol services to support dose reduction
- close collaboration between the patient, his or her carers and all members of the patient's health care team
- arrangements for follow-up including agreed prescribing responsibilities
- distraction strategies, social support, help in reducing temptation to relapse
- GP or other healthcare support and monitoring during the wean