

# SA Palliative Care Community Pharmacy Update

A joint initiative of South Australian Palliative Care Services

Although morphine is the most common choice of opioid, Community Pharmacists are also presented with prescriptions for HYDROmorphine for palliative care patients.

## What is HYDROmorphine?

HYDROmorphine is an opioid for moderate to severe pain with 5-6 times more potent than morphine. Interpatient variability in opioid receptor expression along with pharmacokinetic differences means patients will respond differently to different opioids. Having multiple opioid options allows individualised therapy.

## Which patients may benefit from using HYDROmorphine?

- > **Renal impairment** - moderate renal impairment reduces the clearance of morphine and oxycodone as well as active metabolites causing ADRs. Hydromorphone may be used in mild to moderate renal impairment.
- > **Refractory pain** - pain not responding sufficiently to other opioids may respond to HYDROmorphine
- > **Intolerance** - patients who have experienced side effects to other opioids may tolerate a trial HYDROmorphine
- > **Large opioid doses administered subcutaneously** - HYDROmorphine is more soluble in water than morphine allowing smaller volumes of solution for subcutaneous administration
- > **Reluctance to using morphine** - sometimes patients or carers will have a negative association with morphine and feel more comfortable with an alternate opioid
- > **PBS listing** - All HYDROmorphine formulations are PBS listed which may provide financial benefit over other formulations such as oxycodone injections which are not subsidised on the PBS

## Clinical Considerations

- > **Severe renal impairment** - HYDROmorphine is extensively metabolised via glucuronidation to H-3-G, an active metabolite which can accumulate in severe renal impairment (creatinine

clearance < 10ml/min) leading to ADRs. Dose adjustments will be necessary

- > **Hepatic impairment** - dosing adjustments may be necessary to avoid ADRs in severe hepatic impairment
- > **Frail or elderly patients** may need smaller doses less frequently
- > All patients on opioid medications must be closely monitored for effect, ADRs and interactions

## Access Considerations

- > Dilaudid® brand 1 mg/mL (200 mL) syrup has been discontinued though currently remains on the PBS.
- > Rhodes® brand HYDROmorphine syrup 1mg/ml (473ml) is now available (PBS listed/ TGA Section 19A as of May 2021)
  - > Rhodes® is contraindicated in those with sulphite allergy (see TGA alert)
- > Currently Medsurge have made the Rhodes® brand available through API and CH2. Alternatively call Medsurge for direct supply on 1300788261.
- > Dilaudid® and Rhodes® have different PBS item numbers and cannot be substituted. Please contact the prescriber to arrange a new prescription.
- > Further changes to access in the future are expected.

## Resources

- > [TGA HYDROmorphine alert](#)
- > [Tasmanian Palliative Care Formulary](#)

## For more information

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This update is intended to provide practical up to date and factual information relating to pharmacy and medicines management in the setting of Palliative Care and is based on critical review of available evidence. Individual patient circumstances must be considered when applying this information. Please feel free to distribute this update further to interested colleagues.