Case 7 (Part 1) - June 2016

SA Palliative Care

Community Pharmacy Update

A joint initiative of South Australian Palliative Care Services

Often palliative patients experience breakthrough cancer pain, usually managed with short acting opioids. Pharmacist advice may be needed regarding formulations of fentanyl designed for trans-mucosal absorption (Actiq®, Abstral®, Fentora®).

Breakthrough pain management

Marya lives at home with her husband and has undergone treatment for bladder cancer. She now has nodal metastases in her pelvis causing severe constant pain with additional groin pain when mobilising. She has a previous Adverse Drug Reaction (ADR) to morphine causing itch and has been taking Oxycodone CR 40mg twice daily with oxycodone 10mg (Oxynorm®) when required for breakthrough pain.

Marya has 2 main concerns:

- Frequent episodes of breakthrough pain (using up to 8 doses of oxycodone 10mg a day)
- She feels Oxynorm ® is slow to work with delayed pain relief

Her GP decides to increase the background pain medication to oxycodone 60mg twice daily since Marya is regularly using more than 2 breakthrough doses a day. The aim is to decrease the number of breakthrough pain episodes.

Her GP is also keen to trial one of the new oral-mucosal fentanyl products which is designed to have a fast onset of action. Marya presents a script for Abstral® 200mcg prn 2 hourly. You notice this dose exceeds the recommended starting dose of100mcg.

Trans-mucosal absorption of fentanyl

Fentanyl is highly lipophilic which allows rapid absorption across the oral mucosa into the blood, providing quick onset (10-15min) and short duration of action (1-2hr). The 3 available products utilise different technologies to maximise trans-mucosal absorption; as such they require unique dosing and administration techniques.

Considerations

- All patients must be opioid tolerant with minimum maintenance opioid equivalence of oral morphine 60mg/day (secondary to risk of respiratory depression).
- As the characteristics differ across each product, they are not interchangeable and substitution is unacceptable (ie Actiq 200mcg≠ 200mcg Abstral®).
- All patients must be initiated at a single dose of the lowest strength (regardless of their pain severity or opioid tolerance) due to high inter-patient variability.
- Gastrointestinal absorption will occur if the product is swallowed contributing to a delayed effect.

Useful resources

- Conway SL, Matthews M, Taglieri CA, Costantino RC. Breakthrough Pain in the Oncology Setting. US Pharm. 2012;37(7)(Oncology suppl):3-7.

For more information

Contact the Advanced Practice Pharmacists:

- **Josephine To, Northern**
  Josephine.to@sa.gov.au 8161 2499
- **Michaela del Campo, Central**
  Michaela.delcampo@sa.gov.au 8222 6825
- **Paul Tait, Southern**
  Paul.tait@sa.gov.au 8275 1732

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