

Fast Facts on Pain Management

FAST FACTS #9 COMBINATION ANALGESICS

CASE STUDY:

Ms S is a 45 year old patient with Bone cancer having mild level of pain '3/10' in her left leg. She describes the pain as increasing with movement and ambulation. In reviewing her present analgesics you find the following orders: Tylenol 650 mg po q 4 hours prn for pain or elevated temperature, Percocet 5/325 po q 6 hours prn for severe pain, Tylenol #3 ii tabs q 6 hours prn.

What would you suggest to the physician based on your knowledge of the guidelines?

Main Teaching Points:

When pain is mild to moderate and not relieved by a nonopioid (with or without an adjuvant), the Step 2 WHO ladder recommends adding an opioid. This builds on the previous analgesic used by the patient. If a non-opioid relieves some but not enough pain, it is continued and an opioid is added. A common mistake at the juncture is to stop the nonopioid and start an opioid rather than add an opioid to the nonopioid. Mild to moderate pain is often treated with analgesics in a fixed combination of opioid and nonopioid,

usually acetaminophen. Sometimes aspirin or ibuprofen are combined but this is not recommended in the elderly population.

Only one type combination analgesic (opioid and non opioid, e.g. Percocet or Tylenol #3) is ordered for prn breakthrough pain. Be sure that previous combination analgesics are discontinued before you begin with a new combination. Remember that there is a ceiling dose of acetaminophen of 4 grams per day that a patient can receive because of the side effect of hepatic toxicity. To avoid exceeding the recommended maximum daily dose of 4 grams of acetaminophen, the patient cannot take more than 8 tablets per day of those containing 325mg of acetaminophen. This does limit the amount of combination analgesia that can be used and you may need to change to a single agent and/or a long acting formula.

Remember that round the clock analgesic is more effective than prn dosing to prevent an escalation of pain.

Match the therapy to the pain intensity:

Mild pain: acetaminophen, Moderate pain: opioid combination analgesics, "weak opioids",
Severe pain: "strong" opioids

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Fixed Combination Analgesic Examples

DRUG	ASA	APAP	PROP-N	CODEINE	HYDROCODONE	OXYCODONE
Percocet/Roxicet 2.5/325		325				2.5
Percocet 5/325		325				5
Percocet 7.5/500		500				7.5
Percocet 10/650		650				10
Percodan/Roxicet	325					4.5
Tylox/Roxicet		500				5
Tylenol #2		300		15		
Tylenol #3		300		30		
Tylenol #4		300		60		
Lortab 2.5/500		500			2.5	
Lortab 5/500		500			5	
Lortab 7.5		500			7.5	
Lorcet Plus		650			7.5	
Lorcet 10/650		650			10	
Lorcet HD		500			5	
Vicodan		500			5	
Vicodan HP		660			10	
Vicodan ES		750			7.5	
Darvocet N-100 *		650	100			
Darvocet N 50 *		325	50			
Maxidone		750				10
Zydone		400				5
Norco 5/325		325				5

APAP=Acetaminophen ASA=Aspirin Prop-N=Propoxyphene Napsylate

*Propoxyphene Napsylate is included to give knowledge of the product but is not recommended for the elderly because of poor analgesia effects and toxic metabolite.