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University Health Board

A Guide for Patients being treated for Dependence on Opioid Pain-Killers (Analgesics)

Aneurin Bevan Specialist Drug and Alcohol Service

This leaflet has been designed to answer some of your questions about your treatment for dependency on opioid painkillers. If you have any further queries please ask your doctor or keyworker.

What are Opiates?

Opioids are a group of widely prescribed drugs that are very effective pain-killers. They vary in strength and include tramadol, cocodamol, coproxamol and diamorphine. The more well-known name for diamorphine is 'heroin'. (It may surprise you to know that heroin belongs to the same family of drugs as some commonly prescribed pain-killers). A full list is included at the back of this leaflet.

Dependence on Opioid

If you take opioid medication for a long time it is possible to become hooked on them. This means that when you try to stop, you will experience withdrawal symptoms such as:

- Sweats
- Aches and pains
- Stomach cramps
- Diarrhoea



This can make it difficult to stop the medication without help.

What help is available?

Generally, this consists of a combination of counselling and medication.

Counselling

Your keyworker will work with you to explore and address any under-lying issues that have contributed to the dependency. If you need more specialised counselling (e.g., CBT) we will ensure you are referred for this.

Medication

The aim is to replace the painkiller, which is a short-lasting form of opioid, with a longer lasting version so that you have a steady level in your bloodstream that stops the withdrawal symptoms. The medication we use is something we can control more

easily so, once you have been stabilised on your dose, it will be easier to reduce it than the pain-killers.

There are 2 forms we use:

Methadone
Buprenorphine (Subutex/ Suboxone)

Some people associate methadone and subutex with heroin users, do not be alarmed by this association. Remember that both the pain killers and heroin belong to the opioid group so it makes sense that we treat them with the same medication.

Also, do not worry that you will end up hooked on these replacement medicines. Because they are easier to control, coming off them is much easier than coming off the pain-killers.

What happens next?

If you decide to start treatment with us your keyworker and doctor will arrange the best day for you to start your medication. You will need to be seen a few times over the first week or so to monitor your response to the medication and we will gradually increase the dose until you feel comfortable and all the withdrawal symptoms have disappeared.

Once on the stable dose we will make sure all the counselling work is done and then, when you feel ready, we will start to reduce the medication at a rate you are comfortable with.

Make sure you discuss all your concerns and queries with your key- worker and doctor.

You are not alone and there is a lot of support and advice that ABSDAS can give you alongside your medication.

As the medication prescribed for your problem is a “controlled drug” it is important that you attend all your appointments so that we can monitor your treatment. If you are unable to attend for some reason, please contact us to let us know.

OPIOID PAIN-KILLERS

(Listed as generic names with commoner trade names in brackets)

- Buprenorphine (Temgesic®, Transtec patches®)
- Codeine
- Diamorphine Dihydrocodeine (DF118®)
- Dipipanone
- Fentanyl (Duogesic patches®)

- Morphine (MST®, Oramorph®)
- Oxycodone (Oxycontin®, OxyNorm®)
- Pethidine
- Tramadol (Zydol®)

Aneurin Bevan Specialist Drug and Alcohol Service

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Mae’r ddogfen hon ar gael yn Gymraeg”.**