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Dear Colleague

Re: Safe administration of parenteral opioids

In recent years, there has been much progress in the treatment of acute pain in hospitals. An important contribution to this has come from the continued existence of consultant-led Acute Pain Services, which have promoted the safe and effective use of parenteral opioids.

The risk of respiratory depression with parenteral opioids is well known, and the need for monitoring of patients on such treatments is well-established. Expert guidance exists on this topic, and can be found in the reference below. There has been some recent concern that best practice in this area is not always followed, with potential for harm to patients.

All hospitals should have in place guidelines and protocols for monitoring patients on parenteral opioids, and systems for confirming that high levels of compliance with guidance are being consistently achieved. It is the responsibility of all clinicians to ensure they routinely follow this guidance. Institutions engaged in the training of clinicians should ensure this area is adequately covered in their undergraduate and postgraduate curricula.

Assessing patients' pain is critical to delivering appropriate and safe treatment, and we urge clinicians across all healthcare settings to make it routine practice to ask patients about their pain and document a pain score in the clinical record.

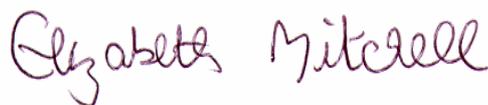
Yours sincerely



SIR LIAM DONALDSON
Chief Medical Officer



DR TONY JEWELL
Chief Medical Officer (Wales)



DR ELIZABETH MITCHELL
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Reference

Horlocker TT, Burton AW, Connis RT, Hughes SC, Nickinovich DG, Palmer CM, Pollock JE, Rathmell JP, Rosenquist RW, Swisher JL, Wu CL. Practice guidelines for the prevention, detection, and management of respiratory depression associated with neuraxial opioid administration. American Society of Anesthesiologists Task Force on Neuraxial Opioids. *Anesthesiology* 2009; 110(2): 218-30.