

# How does the opioid prescribing in your practice measure up? Is it too hot to handle?



- There are increasing concerns about the number of prescriptions for opioid medicines being issued each year for people living with persistent pain.
- The evidence does not support the use of opioids for long-term, non-cancer pain, and there are risks of harm increasing with the dose prescribed and the duration of use.
- Doses above 120mg oral morphine equivalent per day are associated with little additional analgesic benefit but significantly higher risks of harm.

**So how does the prescribing in your practice measure up? Use the thermometer to take the temperature of opioid prescriptions you issue.**

- If you co-prescribe opioids, then it can be easy for the opioid temperature to creep up without realising.
- People taking opioid medicines should have a review at least every year.
- Advice on non-medicinal ways to live with persistent pain should be provided at every opportunity.
- For useful resources to help you advise your patients with persistent pain in other ways, visit: [www.livewellwithpain.co.uk](http://www.livewellwithpain.co.uk)

The opioid thermometer is intended for illustrative purposes and should not be used to assist with conversions between opioid medicines. All equivalences are approximate; there can be significant inter-patient variability.

