

## South Tyneside CCG Position Statement on Opioid Prescribing

Developed in collaboration with the Emergency/ Urgent Care team and the Pain Management team from South Tyneside and Sunderland Foundation Trust

### In GP Practice and Primary Care

South Tyneside CCG **DOES NOT** support the long term prescribing (greater than 3 months) of opioids or the use of high dose opioids (higher than 120mg/daily of morphine or equivalent) for **non-cancer, chronic pain** in adults

**This position statement is intended for use in line with your own clinical judgement**

The WHO pain ladder does not apply to the management of chronic pain and there is little evidence to suggest opioids are helpful in long term pain<sup>1</sup> (lasting over 3 months).

In a recent report, Public Health England found that prescribing opioid pain medicines for longer than 3 months is associated with opioid overdose and dependence<sup>2</sup>.

**South Tyneside has been found among the highest for rates of drug related deaths within England and Wales<sup>3</sup>**

If you suspect drug-seeking behaviour from your patient in any setting, South Tyneside CCG fully supports and encourages any decision to refuse to prescribe opioids.

The Faculty of Pain Medicine (Royal College of Anaesthetists), in partnership with Public Health England advises that if a patient has pain that remains severe despite opioid treatment, it is not working and should be stopped, even if no other treatment is available<sup>4</sup>. Tapering or stopping high dose opioids requires careful planning and collaboration with the patient and all members of their healthcare team<sup>2</sup>.

**For advice on stopping opioids safely, refer to the following:**  
[Tapering & Stopping of opioids. Faculty of Pain Medicine, RCoA ©2019](#)

All drugs prescribed for pain should undergo regular review to evaluate continued efficacy. Periodic dose tapering is necessary to evaluate on-going need.

1. Royal College of Anaesthetists (The), Faculty of Pain Medicine. *The Effectiveness of Opioids for Long Term Pain*. 2019
2. Public Health England. *Dependence and withdrawal associated with some prescribed medicine: An evidence review*. 2019
3. Office for National Statistics (The). *Drug-related deaths by local authority, England and Wales*. Aug 2019
4. Royal College of Anaesthetists (The), Faculty of Pain Medicine. *Opioids Aware: A resource for patients and healthcare professionals to support prescribing of opioid medicines for pain*. 2016

Prescribers should be mindful of the risk of diversion of opioids and other dependence forming medication and should consider the safeguarding implications of prescribing.

### Alternative treatment

Gabapentin and pregabalin should only be prescribed for their licensed indications. South Tyneside CCG does not support the use of pregabalin and gabapentin to treat chronic, nociceptive (non-neurological) pain in adults.

Patients can use various self-management techniques to help with their pain. The [NHS: 10 Ways to reduce pain resource](#) provides further advice, including meditation or gentle exercise such as walking, swimming, gardening and dancing.

### In Urgent and Emergency care

Colleagues working in Urgent Care and Emergency Care departments at the South Tyneside and Sunderland NHS Foundation Trust are supportive of this position statement in primary care. Patients **will not** receive a supply or prescription for opioids to manage their chronic pain in these settings.

For patients requiring analgesia to treat an acute condition, a **limited amount** of pain medication will be supplied for the short term basis. The amount issued will be communicated to the GP who can then review ongoing pain management needs if appropriate.

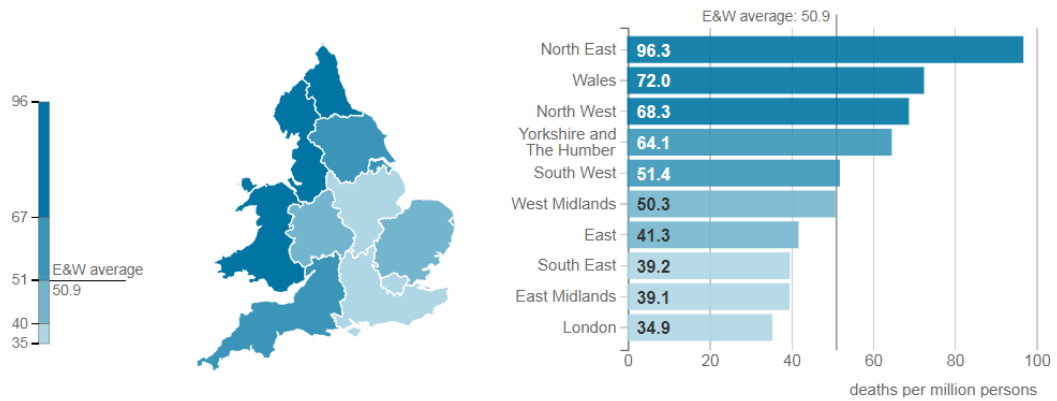
### Further information and useful resources:

- Medicines Optimisation contact: [marie.thompkins@nhs.net](mailto:marie.thompkins@nhs.net)
- South Tyneside CCG endorsed [Resource Pack: Opioid Prescribing for Chronic Pain](#)
- [Royal College of General Practitioners. Top Ten Tips: Dependence Forming Medications](#)
- [Deaths related to drug poisoning in England and Wales: 2018 registrations](#)

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#### Figure 4: Drug misuse has a marked North-South divide

Age-standardised mortality rate for deaths related to drug misuse, by country and region, registered in 2018



Source: Office for National Statistics

1. Royal College of Anaesthetists (The), Faculty of Pain Medicine. *The Effectiveness of Opioids for Long Term Pain*. 2019
2. Public Health England. *Dependence and withdrawal associated with some prescribed medicine: An evidence review*. 2019
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