

Guidelines on the use of Subcutaneous Oxycodone

Indications

Oxycodone is a strong opioid with agonist activity at mu and kappa opiate receptors. It is a suitable alternative in a syringe driver for patients who experience side effects such as hallucinations with diamorphine /morphine.

Transferring from other opioids to Oxycodone

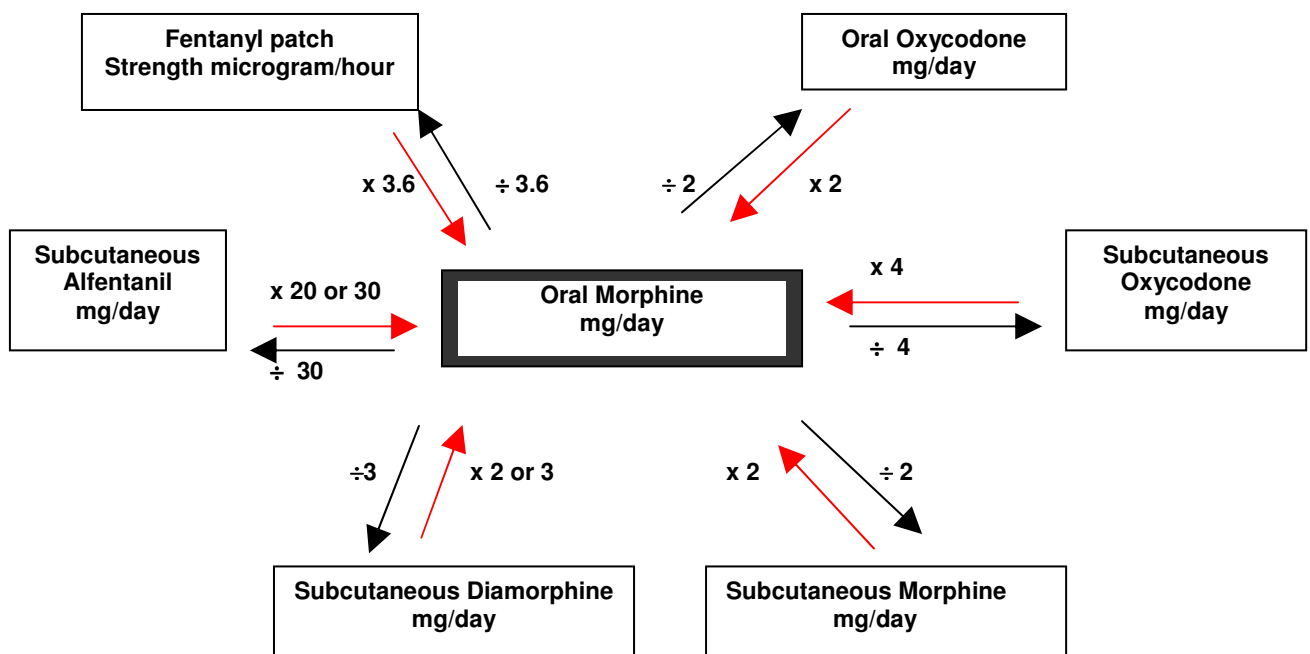
The prescribing rules for oxycodone are the same as for morphine/diamorphine in a syringe driver. The subcutaneous breakthrough dose is calculated as being roughly 1/6th of the total 24 hours dose of s/c oxycodone in a syringe driver.

Dose reduction may be needed in renal and hepatic impairment. Note in chronic renal failure subcutaneous alfentanil is the preferred opioid in a syringe driver (see separate alfentanil guidance)

When converting from other opioids use the conversion below. Always convert current opioid to equivalent oral morphine dose and then convert this to subcutaneous oxycodone. (Note subcutaneous oxycodone is roughly twice as potent as oral oxycodone).

Dose conversion chart

To make any conversion from one opiate to another always convert the dose back to an equivalent oral dose of morphine first



Note : These dose conversions are a guide only, based on average doses. At high doses conversion from one opiate to another must be always be reviewed cautiously to avoid sudden opiate toxicity.

Compatibility and strengths available

- Available as : Oxycodone 10mg/mL – 1mL and 2mL amps
- May need to use 20mL or 30mL syringe to accommodate large doses
- Reconstitute with water for injection (or sodium chloride 0.9%) in a syringe driver.
- ***Use water for injection if cyclizine prescribed***
- Appears to be compatible with most drugs in a syringe driver, although has the potential to precipitate with cyclizine at higher concentrations. Only use water for injection if mixing cyclizine and oxycodone .

Drug Interactions

Oxycodone is metabolised in part via the CYP2D6 and CYP3A4 pathways. While these pathways may be blocked by a variety of drugs, such blockade has not yet been shown to be of clinical significance with this agent.