

# Management of Cancer Pain

**Thorough assessment of pain is essential**

**Pain: Mild**

**Step 1**

Paracetamol  
1 gram 4 times daily [given regularly]

± NSAIDS  
± Other Adjuvant therapy – see box on far right

Maximum of 4 grams paracetamol in 24 hours

**Pain: Mild - Moderate**

**Step 2**

OPIOID for mild-moderate pain and PARACETAMOL  
e.g. Co-codamol 30/500, 2 tablets 4 times daily

± NSAIDS  
± Other Adjuvant Therapy  
± Consider laxatives

Try one preparation only.  
If not successful, move to Step 3.

**Pain: Moderate - Severe**

**Step 3**

OPIOID for moderate-severe pain and PARACETAMOL  
Initiate treatment with normal release morphine 5-10mg regularly every 4 hours.  
A lower dose may be sufficient in elderly or renal impaired

+ Laxatives  
+ Prophylactic anti-emetic as needed  
e.g. haloperidol or metoclopramide as needed  
± NSAIDS  
± Other Adjuvant therapy

**Breakthrough Pain -**  
Use normal morphine tablets or liquid  
Give 1/6<sup>th</sup> of total daily morphine dose.  
Reassess after 30 minutes and repeat same breakthrough dose if required.  
If 2 breakthrough doses needed within 2 hours, patient requires medical reassessment.

Increase morphine dose by 30% [or according to breakthrough needed] each day until pain is controlled or side effects intervene.

Pain Controlled

Convert to controlled release opioid.  
Controlled release morphine: if converting to a 12 hourly preparation, divide daily morphine dose by 2.

Constipation: Prescribe appropriate laxatives. Usually softener and stimulant (e.g. lactulose and senna) and titrate to effect.

Explanation for patient and carer.

Pain not Controlled

- Review diagnosis
- Consider adjuvant therapy
- Consider other treatments or contact Palliative Care Team.

Morphine unsuitable

Consider alternative opioids e.g. oxycodone; transdermal fentanyl (see accompanying pain guidelines and Fentanyl Algorithm)

**REMEMBER:**

Adjuvant therapy

- Bone, liver, soft tissue infiltration - NSAID (e.g. diclofenac 50mg TID)
- Raised intracranial pressure, nerve compression, liver pain - STEROIDS (e.g. dexamethasone 8-16 mg/day).
- Nerve Pain - ANTICONVULSANT (e.g. gabapentin start 100-300mg at night)
- Nerve pain - TRICYCLIC ANTI-DEPRESSANTS (e.g. amitriptyline starting dose 10-25mg at night [Unlicensed indication](#))
- TENS (transcutaneous electrical nerve stimulation).

**Parenteral Analgesia**  
(unable to swallow and / or persistent nausea and vomiting)  
Parenteral diamorphine dose: calculate 24 hour dose of oral morphine. Divide by 3. This is the 24 hour subcutaneous diamorphine dose.  
Also prescribe 1/6<sup>th</sup> of daily diamorphine dose for breakthrough pain