

MUR TIPS

Fentanyl Patches—Do your patients or their carers know the right way to use them?

Every day Community pharmacists are advising patients on the use of their medicines, and as we know some medicines are more difficult to use correctly than others. Fentanyl patches are, in practice, proving to be a more complex drug for the patients and carers to manage.

The Care Quality Commission (CQC) stated in its report *The Safer Management of Controlled Drugs* (2008), that it had concerns about the practices of administration in social care settings. Both the inspectorate and community pharmacists felt the problems arise because the patches are designed to last 72 hours.

Below we have written some advice on how to use the patches, which could be completed as part of the advice provided in a MUR.

Fentanyl Patches - tips for an MUR:

1. Fentanyl patches should be applied to dry, hairless, non-irritated skin on a flat surface of the torso or upper arm. If necessary, hair should be clipped (not shaved) prior to application. Soap, talc, cream or moisturiser should not be used just before applying a patch.
2. The transdermal patch should be pressed firmly in place with the palm of the hand for approximately 30 seconds, to ensure a good contact (important as some patients comment on the patches not sticking).
3. The patch should be replaced every 72 hours (3 days). The old patch should be removed before applying the new one and the new one stuck to a different area of skin.
4. Dosage adjustment of Fentanyl patches should be at 72 hour intervals and in steps of 12-25µg/hr. More than one patch may be used for doses greater than 100, however all the patches should be applied at the same time to reduce confusion.
5. When starting the patch full analgesic effect may not be reached until the 2nd day, and some additional analgesia might be required in the interim. Most patients will see some benefit in 12-24 hours.
6. The equivalence to morphine is 90mg taken in a 24 hour period is similar to the analgesia provided by 25µg/hr.

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