



**University
Hospitals Sussex**
NHS Foundation Trust

Oral Morphine

Patient information

Quick-acting or immediate release morphine:

Oramorph® liquid, Sevredol® tablets.

Long-acting or modified release (12 hourly) morphine:

MST Continus® tablets or granules, Zomorph® capsules, Morphgesic® SR tablets, MXL® capsules and others.

There are different forms of morphine and different brands – check the name of the medicine on the box. Morphine is a strong opioid pain medication.

What is morphine used for?

Morphine is used for moderate to severe pain, and to help breathlessness. Quick acting morphine starts to work after about 30 minutes and usually lasts for about 4 hours. It is used to control breakthrough pain as it works quickly.

It may be given in regular doses when your doctor is working out how much morphine is needed to control your pain. Long acting morphine is used to control on-going pain and is taken regularly.

Isn't morphine only used for patients who are at the end of life?

No. Morphine is given for different sorts of severe pain and not just pain from cancer or when people near the end of their lives. Treatment with morphine may be needed to allow you to continue having as comfortable a life as possible. You will be able to go on taking morphine for as long as you need to. The effects do not wear off with time and the dose can be increased if needed.

When do I take it?

Long acting morphine is taken regularly every 12 hours to control pain. When you are at home, take your morning dose when you wake up and the evening dose about 12 hours later. If the pain comes back between your regular doses, you can take a dose of quick acting morphine. Wait 60 minutes after taking the extra dose. If you still have severe pain, take a second dose of the quick acting morphine. If you need more than 2-3 extra doses of quick acting morphine in a day, tell your doctor or nurse as all of your pain medication may need adjusting.

Sometimes when doctors are working out the long acting dose that will be right for you, they will give you more regular quick acting morphine (taken every four hours) for a short time. They will explain this fully. Do not stop taking morphine suddenly.

What do I do if I forget to take a dose?

Long acting morphine: If you remember within 4 hours of missing your dose, take the dose straight away. If you are more than 4 hours late, please call your doctor or nurse for advice.

Quick acting morphine: Take a dose as soon as you remember. Do not take a double dose to make up for the missed one. If you are sick and bring up the medicine, repeat the dose as soon as you feel better.

Are there any side effects from taking morphine?

Sleepiness:

This is most common when you first take morphine or when the dose is increased. It should improve after a few days.

Constipation:

This is a very common side effect. It is important to drink plenty of fluids and always take a laxative regularly as prescribed by your doctor. The dose of laxative can be increased or reduced to make sure you pass a soft motion regularly.

Sickness:

If you feel sick when you first start to take morphine, try taking it with food. Your doctor may need to give you some anti-sickness medicine for a few days until the sickness goes away.

Will I become addicted to morphine and unable to stop taking it?

If you no longer need to take morphine, please discuss with your doctor who can provide advice on stopping it gradually.

Will morphine always relieve my pain completely?

Although morphine is a very good pain killer, it is not helpful for all types of pain. Other treatments may be needed and suggested by your doctor or nurse.

What do I do if I get pain between the regular doses of morphine?

If the pain is mild, paracetamol may help. (Do not take more than eight par- acetamol tablets in 24 hours and more than two tablets every four hours). If it is more severe you should take a dose of quick acting morphine (see above). If you need more than 2-3 extra doses in a day, tell your doctor or nurse.

Some people find that doing certain things like having a bath or going for a walk brings on the pain. Your doctor or nurse may suggest you try taking a dose of quick acting morphine before you start doing something that brings on the pain.

How will I know if the morphine is no longer suitable for me?

You may still have pain despite taking bigger doses of morphine and may feel unwell in one or more of these ways:

- more sleepy than usual
- feeling sick more of the time
- restlessness or jumpiness
- bad dreams and/or hallucinations.

Do not worry if this happens. Tell your doctor or nurse. Your doctor may reduce your dose of morphine and suggest other treatments to help the pain.

Can I drive?

Once you get used to taking morphine (strong opioid pain relief) and do not feel sleepy or unwell you may be able to drive.

You must discuss this with your doctor first. You must not drive if you feel that your driving may be impaired by pain, your condition or medication. Following recent advice from the Department of Transport please carry evidence that you have been prescribed morphine (strong opioid pain relief) by a doctor, in case you are stopped by the Police.

Can I drink alcohol?

A small glass of wine, beer or a small sherry or whisky is usually permitted, but you should discuss this with your doctor. It is best to avoid more than a small drink otherwise you may become too drowsy.

Any questions?

If you have any questions about your morphine or other medicines, please ask your community nurse, GP or community palliative care nurse, if you have one.

Created by Simon Matthews August-2013

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**This leaflet is intended for patients receiving care
in Brighton & Hove or Haywards Heath**

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