

Date: July 18, 2005

Subject: DRC Recommendations to DCC and DHS

To: DHS, DCC, Dean's Office

From: Henry F. Simmons, Jr., MD, Ph.D.  
Chairman DRC

At its 07/14/05 meeting, the Drug Review Committee considered the potential toxicity and therapeutic roles of the long acting opioids in the management of patients with chronic pain of non cancer origin.

Based upon the bulk of the best available evidence concerning fentanyl, hydromorphone, methadone, morphine, and oxycodone the Committee concluded the following:

There is insufficient evidence to conclude in general that one agent is safer or has fewer adverse effects than another.

There is sufficient evidence to conclude in general that all five agents are efficacious.

There is insufficient evidence to conclude in general that one agent is more efficacious based upon demographics, comorbidities or adverse drug interactions.

In a discussion of problems that might arise in prescribing the aforementioned five agents, the committee noted the following:

A transdermal preparation should be available for patients who cannot tolerate oral medication.

Methadone should be available.

Elderly patients taking one opioid who have secondary constipation should have an alternative.

Kadian may pose special problems for patients who are taking H2 blockers or proton pump inhibitors due to potential problems with release of the drug.