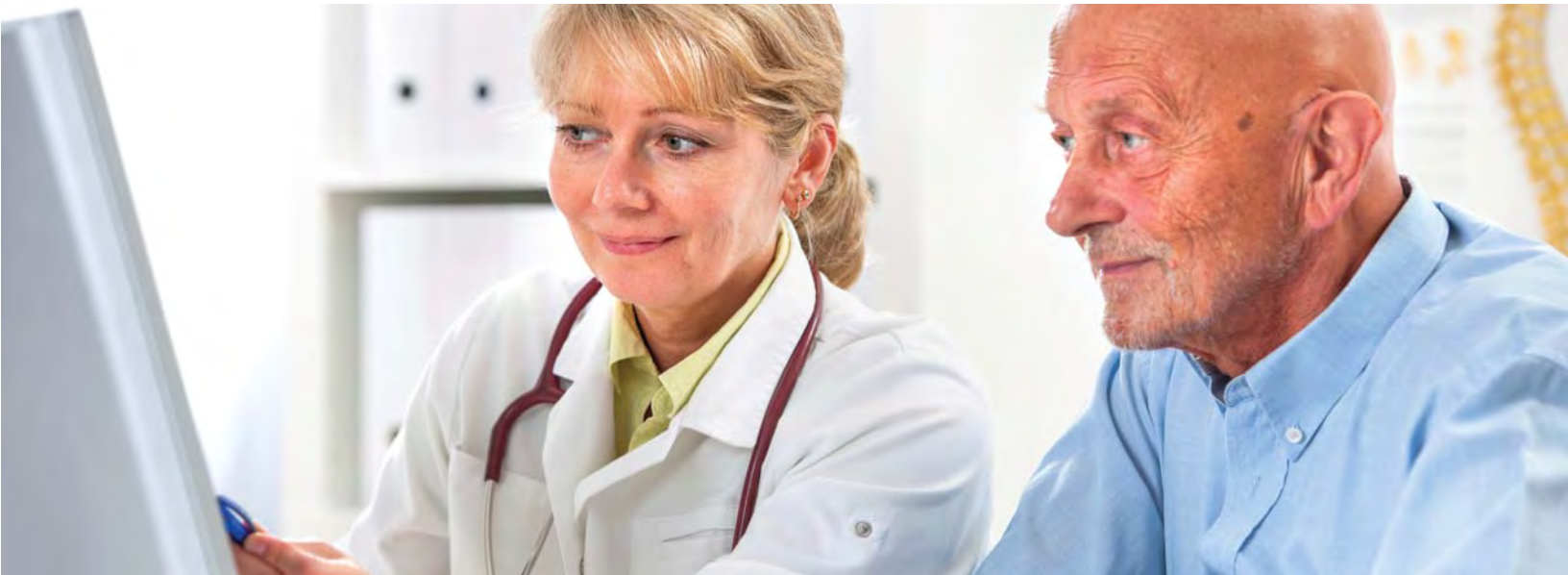


Pain at the End of Life – Common Questions



The percentage of people with pain increases to about 50% in the last four months of life. Pain associated with a life-limiting illness or at the end of life requires special attention and can best be treated by a palliative care or hospice provider. You may have concerns and questions about pain at the end of life. The following questions and answers address the common concerns related to pain during the last months and days of life.

Q: Will pain medications cause me to be sleepy all the time?

A. Opioid analgesics (morphine, codeine, et. al.) can cause sedation at first, but with continuing doses of medication you will feel less sleepy and be able to interact with family and friends and perform normal activity.

Q. Will taking opioids make me addicted?"

A. Very few people who use opiates for pain relief ever become addicted or “psychologically dependent.” When opioids are prescribed by your physician to control pain, he/she begins with the lowest dose and increases it only if the medication is not controlling your pain consistently. As your terminal disease progresses, an increased dosage of opioid may be needed to control the pain on a continuing basis.



Pain at the End of Life – Common Questions

Q. If I take morphine too early, will it control my pain even when it gets worse?

A. If your pain increases over time, your morphine dose can be increased as needed. There is no reason to wait until your pain is out of control.

Q. Does morphine (opioid) have many side effects?

A. All opioids can cause nausea, drowsiness, itching, and constipation. However, side effects will generally stop after a few days as your body adjusts, and these side effects can be easily treated by your palliative care or hospice provider.

Q. Will taking Morphine cause death to happen more quickly?

A. Morphine does not hasten death. Higher doses of morphine are sometimes necessary to eliminate pain in the dying individual. Morphine can aid in a more comfortable death, not a quicker one.

Q. Does starting morphine mean death is imminent?

A. No. The stage of terminal illness does not dictate starting morphine – it is the degree of pain that guides your palliative care or hospice provider to recommend morphine or other opioids for adequate pain control. The use of opioids and sedatives for symptom control in the last days of life has NOT been associated with a change in length of patient survival. When started at a low dose and increased as needed, these medications have been proven safe and effective in the management of severe pain.

^{3,4} Whitecar P, et al. Managing pain in the dying patient. AAFP Feb 1, 2000; ⁵ Von Gunten, Charles. Morphine and Hastened Death., Fast Facts#36. American Academy of Hospice and Palliative Medicine. Feb 2000; ⁶ Morita T, et al. Effects of high dose opioids and sedatives on survival in terminally ill cancer patients. Journal of Pain and Symptom Management 2001; (21)4:282-89.

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