

SECTION 5: CONVERTING FROM SHORT-ACTING OPIOIDS TO METHADONE

General Principles

Methadone requires slow, careful dose titration.

- *“Start low and go slow.”*
- Because methadone typically takes 5-7 days to reach steady state:
 - Do not adjust doses more frequently than every 5-7 days.
 - Caution the patient not to expect full analgesic effect until the end of one week at a given dose.
 - The frequency and/or severity of adverse effects is also likely to increase during that time period.
 - A graded analgesic response to dose increments should be observed.
- Methadone is available in 5 mg, 10 mg and 40 mg tablets. Tablets are scored to facilitate the use of half-doses when desired.

Converting Short-Acting Opioids to Methadone

1. Calculate the total daily dose requirement of the short-acting opioid (including PRN doses).
2. If the previous total daily opioid dose is less than 200 mg, convert to methadone 2.5-5 mg q8hr as dictated by the clinical situation.
3. Increase by 2.5-5 mg q8h every 5-7 days as needed.
4. If the patient develops intolerable sedation, hold or decrease the next methadone dose and adjust the regimen by lowering the dose or increasing the dosing interval.
5. If the previous total daily opioid dose is greater than 200 mg, see “Converting Long-Acting Opioids to Methadone” in Part II, Section 6.

PART II: GUIDE TO PRESCRIBING OPIOIDS FOR CHRONIC NON-MALIGNANT PAIN

Section 5: Converting from Short-Acting Opioids to Methadone

EXAMPLE: A 54-year-old male with a history of chronic pain has partially responded to the maximum daily dose of Vicodin. He has a new job and desires a long-acting medication so he won't be "always taking pills." Because of his new income, he may lose his Medicaid eligibility and will have to pay out-of-pocket. You decide to start him on methadone 5 mg q8 and warn him that it may take up to 5 days before he feels the full benefit. You continue him on the Vicodin for rescue therapy, suggesting he will need to take it less often as the methadone reaches steady state drug levels. You caution that he may notice increasing sedation as the methadone takes effect and that he can cut the methadone dose or increase to a q 12 hour interval as he develops tolerance. You start the new regimen on Tuesday so potential peak side effects would occur on the weekend and not interfere with work, and schedule a follow-up in one week.