

ANTICIPATORY PRESCRIBING FOR DYING PERSON – CORE DRUGS

DRUG	FORMULATION	SIZE OF AMPOULE	AMOUNT TO PRESCRIBE	USUAL PRN DOSE	INITIAL 24 HOUR CSCI DOSE	RECOMMENDED MAXIMUM DOSE	GUIDANCE FROM/ COMMENTS
MORPHINE For pain in opiate naïve person <ul style="list-style-type: none"> Note doses will be higher if person already established on opioids Seek advice if any concern about converting oral doses 	10mg/1ml ampoule	1ml	5 (five) ampoules	2.5 mg hourly subcutaneously	10-20mg	<ul style="list-style-type: none"> If 3 or more prn doses required seek medical review Consider syringe pump if needed 2 or more doses in 24 hours No ceiling dose – review frequently and titrate dose according to response 	<ul style="list-style-type: none"> PCF6 (Palliative Care Formulary 6th edition) Clinical Practice Summary (CPS)
MORPHINE For breathlessness	10mg/1ml ampoule	1ml	5 (five) ampoules	2.5mg 4 hourly subcutaneously	5-10mg	Consider syringe pump if 2 or more doses needed in 24 hours	<ul style="list-style-type: none"> CPS
MIDAZOLAM For agitation & terminal restlessness	10mg/2ml ampoule (5mg/ml)	2 ml	5 (five) ampoules	2.5mg – 5mg 2 hourly subcutaneously	10-20mg	<ul style="list-style-type: none"> Consider syringe pump if 3 or more doses needed in 24 hours Seek advice from Palliative Care Helpline when 24 hour dose reaches 30mg 	<ul style="list-style-type: none"> PCF6 says can give hourly prn CPS
LEVOMEPRMAZINE For nausea and vomiting	25mg/1ml ampoule	1ml	5 ampoules	2.5 - 6.25mg sc 6 hourly	Titrate up according to response	25mg	<ul style="list-style-type: none"> Lower dose less sedating Long acting – can be given by bolus sc injection OD or BD CPS
GLYCOPYRONIUM For respiratory tract secretions	200 micrograms/1ml ampoule	1ml	5 ampoules	200 micrograms 2 hourly subcutaneously	600 micrograms	1200micrograms	<ul style="list-style-type: none"> Start syringe pump when first stat dose given to reduce build up of new secretions Less sedative than Hyoscine Hydrobromide CPS

ANTICIPATORY PRESCRIBING FOR DYING PERSON – ALTERNATIVE DRUGS TO CONSIDER

DRUG	FORMULATION	SIZE OF AMPOULE	AMOUNT TO PRESCRIBE	USUAL PRN DOSE	INITIAL 24 HOUR CSCI DOSE	RECOMMENDED MAXIMUM DOSE IN 24 HOURS	GUIDANCE FROM COMMENTS
HALOPERIDOL For delirium or nausea and vomiting	5mg/ml ampoule	1ml	5 ampoules	500 micrograms sc 2 hourly for delirium 6 hourly for nausea and vomiting	1.5mg	10mg Seek advice if needing > 5mg/24hours	<ul style="list-style-type: none"> PCF6 CPS
CYCLIZINE For nausea and vomiting	50mg/1ml ampoule	1ml	5 ampoules	50mg 8 hourly subcutaneously	150mg	150mg	<ul style="list-style-type: none"> Use water for injection diluent in syringe pump Incompatible with oxycodone CPS
HYOSCINE HYDROBROMIDE For respiratory tract secretions	400micrograms/1 ml ampoule	1ml	5 ampoules	400micrograms 2 hourly subcutaneously	1200 micrograms	2400micrograms	<ul style="list-style-type: none"> Start syringe pump when first stat dose given to reduce build up of new secretions Paradoxical agitation can occur CPS
LEVOMEPRMAZINE For terminal restlessness and agitation	25mg/1ml	1ml	5 ampoules	6.25mg – 12.5mg sc hourly	Titrate up according to response	<ul style="list-style-type: none"> Much higher doses may be needed for terminal restlessness – up to 200mg Seek advice from Palliative Care helpline 	<ul style="list-style-type: none"> Useful in addition to midazolam if restlessness not settled PCF6 says hourly CPS says 4-6 hourly
OXYCODONE For pain in opiate naive person with impaired renal function Note doses will be higher if person already established on opioids	10mg/1ml ampoule	1ml	5 ampoules	2.5mg hourly sc	5-10mg	<ul style="list-style-type: none"> If 3 or more prn doses required seek medical review Consider syringe pump if needed 2 or more doses in 24 hours 	<ul style="list-style-type: none"> No ceiling dose – review frequently and titrate dose according to response Incompatible with cyclizine in syringe pump

NOTES

- Anticipatory drugs may be indicated for those who are in their last weeks or months of life, not just the last days of life e.g if difficulties swallowing are anticipated
- Remember to sign controlled drugs and state quantities in WORDS and FIGURES
- An authorisation form as well as the prescription may be required for the administration of drugs at home
- Not all of the above medication may be indicated
- A quantity of FIVE ampoules is recommended, however, the doses and quantities may need to be adjusted depending on the patient's existing medication
- Remember to prescribe 10 ampoules of 10ml water for injection along with anticipatory medication for use as the diluent with a syringe pump
- Midazolam in doses as for agitation and terminal restlessness can be used with morphine to reduce the distress of severe breathlessness
- Midazolam in bigger doses (10mg sc) may be required if seizures are likely
- If the person is using transdermal opioids (fentanyl or buprenorphine) for pain control, keep the patch on and remember to change it at the scheduled times. Use subcut opioid for breakthrough pain; if needed regularly start CSCI in addition to patch; ensure prn opioid adequate for both patch and CSCI
- Remember the 24 hour Palliative Care Professional Helpline if you need advice **07730639399**