CAREGIVER TIPS & INFO-

MORPHINE FACTS

Morphine and other medications in the morphine family, such as hydromorphone, codeine and fentanyl, are called opioids. These medications may be used to control pain and shortness of breath throughout an illness or at the end of life.

ROXANOL

- Liquid Oral Morphine is also called Roxanol.
- Common dosing: 20mg/ml of Roxanol (use a syringe or dropper to measure)
- Given sublingually or orally
- Roxanol is a short-acting pain medication and it is also used to treat shortness of breath, anxiety and rapid breathing
- Roxanol dilates the bronchioles in the lungs, therefore increasing the oxygen capacity
- Roxanol takes effect in about 15 minutes after administered
- Roxanol can cause sedation initially, but decreases within a few days (if taken regularly)
- By easing pain and making breathing easier, opiates allow the person to get rest

THE PATIENT

- The patient declines because of the illness with or without the morphine
- With pain reduced to a tolerable level, the person can eat, sleep, be more alert and maintain independence and dignity
- Pain and shortness of breath are exhausting and people at the end of life have limited strength and energy, so treating symptoms may slow down the rate of decline, if only for a few hours
- When a person is receiving regular pain medication such as Roxanol in the final hours/days of life, there is always a "last dose"
- To the family at the bedside, it may seem like the drug caused or contributed to the death, especially if the death occurs within a few minutes
- It is simply the last medication in the minutes or hours before the death occurs naturally

WHAT TO EXPECT

- Constipation is expected, stool softeners should be ordered.
- Roxanol can become less effective over time, tolerance is possible. The physician can increase dosage at that time
- There is no limit to the amount of morphine that can be prescribed to treat symptoms

• In the last few hours of the natural dying process, a person's breathing becomes shallower and faster than normal. The breathing muscles become weak, extra muscles help out, appearing the person is working harder to breathe but does not always mean that they feel short of breaths. The person dies when he/she does not draw a breath again after a pause

• Addiction is rare, less than 1% in a patient taking morphine for pain/breathing

BOTTOM LINE

Morphine/Roxanol can improve quality of life, they play an important role in maintaining the person's comfort throughout an illness and the dying process.



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