

ABSTRACT

**Drug Utilization Study of Analgesics Opioid for Treating
Breakthrough Pain in Cancer Patients
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Breakthrough pain (BP) is an exacerbation pain occurring in patients with chronic pain who receive opioid therapy every day. BP has not been routinely recognized, evaluated, and treated. This study aimed to analyze the utilization of analgesic opioid, including dose regimens, frequency of use, and the actual adverse effect in cancer patient with BP. Data were collected by retrospective method in the period of January until December 2017. There were 101 patients who met the inclusion criteria.

The results showed that all patients received opioid around the clock for treating background pain and rescue medication for treating BP. From 335 visits, there were 334 of patient visits getting morphine immediate release (MOIR) as rescue medication with a dose percentage between 6.67%-60% and 1 visit getting codeine with a dose percentage of 16.67%. The percentage of rescue medication dose was calculated with regards to the patient's total daily opioid dose to treat background pain. Of 335 visits, 233 of patient visits received the right proportion of opioid rescue medication doses, while 102 patient visits received a greater dose proportion than recommended dose of 15-20%.

In conclusion, MOIR was the most commonly prescribed analgesic to treat BP and used in 6,67%-60% of daily dose with the frequency of use between 2 to 6 times a day. There were 189 (56,42%) patient visits when the patient experienced the adverse effects of opioid. Actual adverse effects that were identified were constipation, nausea, and vomiting

Keywords: breakthrough pain, cancer pain, opioid