

## ABSTRACT

Pain in cancer is acute and chronic pain with episodes of erratic attacks following the development of cancer. Codeine and paracetamol are drugs in pain management of pediatric cancer patients. The combination of the two drugs provides a synergistic effect that can increase the analgesic effect and decrease the dosage of each analgesic thus decreasing the side effects of both. The use of codeine and paracetamol combination is based on the response and clinical condition of each individual at all times. This study aimed to describe the dosage, route of administration, frequency of administration, dose change, side effects, and potential interactions that may occur during the use of paracetamol and codeine combination. This research was conducted in Palliative Care Unit of Dr. Soetomo Hospital Surabaya. The samples were pediatric patients with cancer diagnosis and this study had been reviewed by Research Ethics Committee of Dr. Soetomo Surabaya. This study was retrospective observational study with descriptive analysis method. Samples that meet inclusion criteria was 60 patients and they were obtained from January 1, 2016 until December 31, 2016. The results indicate that there was 63.6% of appropriate codeine dose while 36.4% used codeine lower than literature dose range. In addition, there was 80.4% of appropriate paracetamol dose while 19.6% used paracetamol lower than literature dose range. There were two frequency patterns of codeine and paracetamol administration as

analgesic for cancer. Those frequency patterns were every 6 hours / 4x daily (35.3%) and 4 hours / 6x daily (48.4%). The increasing and decreasing dose along with codeine replacement with morphine can be found. In patients with impaired liver function, paracetamol was replaced with sistenol to reduce hepatotoxic risk. Potential adverse effects of codeine were constipation (5.9%). There was no potential interactions of codeine and paracetamol with other drugs were recorded in the medical record.