CareSearch Project Research Studies Register: Registration Proforma	0095

Study Title: Opioid Conversion Ratios: Is there an Australian consensus

Brief description of the study: Survey of Opioid Conversion Ratios used by Palliative Care Specialists in Australia.

Background: Opioids are the mainstay for treatment of pain in Cancer patients, (1,2). Opioid switching between administration routes or drugs is a common practice in Palliative care, (3,4,5). A number of equianalgesic tables exist to aid Palliative care specialists with these conversions but these can vary widely in their recommendations, (6,7,8). Equianalgesic doses are difficult to determine due to variation amongst individuals in kinetics and pharmacodynamics, (9) and conversion tables are generally recommended as an initial guide only, (6-9). Similarly the calculation of breakthrough analgesic doses is another area of Palliative Care where evidence from RCTs is limited, (10), and variations in recommendations exist. Various ratios of the total daily opioid dose are suggested, from 1/6 to 1/10, (11,12,13) and a proposed double-blind n-of-1 trial listed on the CareSearch website will look at breakthrough dose ratios of 1/6, 1/8 and 1/12.

It is our impression that significant variation in breakthrough dose calculation and opioid conversion ratios exist in Australia. Potentially this could compromise patient safety, as well as interfering with consistency in education for health professionals in Palliative care and other disciplines. Identifying areas of difference may also assist in guiding further research into the areas of Breakthrough dose calculation and Opioid dose conversion ratios.

Objectives: To examine variations in current practice amongst Australian Palliative Care specialists in determining;

1. Conversion of opioid doses between administration routes
2. Equianalgesic dose conversion between opioid medications
3. Calculation of breakthrough analgesic doses of Opioids.

Study Design: An online survey will be sent to Palliative care specialists working in the 225 centres listed on the National Palliative Care Service Directory. Questions will be predominantly tick-boxes with the opportunity for free text if needed. Telephone calls will be placed to each centre to gain consent for involvement and notify staff when the survey will be forwarded to them. Information being collected by the survey relates to the objectives listed above and will predominantly focus on the use of morphine, oxycodone, hydromorphone and fentanyl, with more limited review of tramadol, transdermal buprenorphine and methadone use.

Personal profiles of respondents will be de-identified. Survey responses will be

References:

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Study Methodology: (Please mark with an x which type of study methodology)

	Epidemiology
X	**Health Services / Health Economics / Quality Improvement**
	Qualitative, Observational or Descriptive
	Mixed Method
	Systematic Review
	Intervention: RCT
	Intervention: Comparative or cohort study
	Intervention: Case series

Project details:

Funding source (Optional):						
Has the study received ethics approval?		Yes		No		Not applicable
Project starting date:						
Project completion date:						

Multi site:	**X**	Yes		No		Not applicable

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Associated publications / reports:	
Topics (Admin only) Pain	