

CONVERSION AND BREAKTHROUGH CHART

Note that the 25mcg/hr Fentanyl patch must be used with caution in patients who are opioid naïve.

The figures below are an approximation and the patient should always be reviewed for signs of toxicity and inadequate analgesia during a conversion.

When switching opioid consider whether the patient's pain is already controlled as to whether a higher dose is needed.

The ranges quoted are suggested doses of the alternative to use based on strengths of preparations available & should minimise the number of tablets / caps required

FENTANYL PATCH (micrograms / hour)	EQUIVALENT ORAL MORPHINE (mg in 24 hours)	EQUIVALENT S/C DIAMORPHINE (mg in 24 hours)	BREAKTHROUGH ORAL MORPHINE (mg)	BREAKTHROUGH ORAL OXYCODONE (mg)	BREAKTHROUGH S/C DIAMORPHINE (mg)
12	45 (40-60)	15	7.5 (5 - 10)	3.5 (2.5 - 5)	2.5
25	90 (80-100)	30	15 (10 - 20)	7.5 (5 - 10)	5
50	180	60	30	15	10
75	270 (240 - 300)	90	45 (40 - 50)	22.5 (20 - 25)	15
100	360	120	60 (50 - 60)	30	20
125	450 (440 - 460)	150	75 (60 - 80)	37.5 (30 - 40)	25
150	540 (520 - 580)	180	90 (80 - 100)	45 (40 - 50)	30
175	630 (580 - 640)	210	105 (100 - 120)	52.5 (50 - 60)	35

FOR ANY ADVICE OR INFORMATION REGARDING HOW BEST TO USE FENTANYL PATCHES OR MANAGE OPIOID SWITCHING CONTACT A MEMBER OF THE SPECIALIST PALLIATIVE CARE TEAM