

Journal Watch – Dyspnea & Opioids & Non-Cancer – April 2018

**Article:**

Prescription of opioids in breathlessness in end-stage COPD: a national population-based study.

Adhmadi, Z., Bernelid, E., Currow, D. & Ekstrom, M.

International Journal of COPD; 2016(11): 2651-2657.

Article link: DOI: [10.2147/COPD.S112484](https://doi.org/10.2147/COPD.S112484)

**Review:**

**Strengths:** Randomized selection was used to obtain opioid prescriptions for patients. A national data base to obtain prescription was used. They had a total of approximately 1 year follow up which seems like a reasonable time frame to follow symptom management in end-stage severe COPD. They did include WHO status in their assessment for comparison of severity of disease and opioid prescription.

**Weaknesses:** Not a large sample of patients included (575). It would have been useful to identify if patients used the opioid as per the written indication. There was a large amount of prescriptions that had an unknown indication. Adverse events related to opioid prescription also would be helpful.

**Relevance to palliative care:** Opioid use for dyspnea at the end of life is commonly used. Individuals with non-cancer chronic diseases such as COPD may have their dyspnea undertreated due to fear of adverse events. Improving education surrounding opioid use for community physicians in management of refractory dyspnea in end stage COPD may result in better symptoms control.