

# Morphine kills pain -- not patients

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Many people, including health care workers, believe that morphine is a lethal drug that causes death when used to control pain for a patient who is dying. That is a misconception according to new research published in the latest issue of *Palliative Medicine*, from SAGE Publications.

Two articles in the peer-reviewed journal address research led by Professor Bassam Estfan of The Taussig Cancer Center in which patients in a specialist palliative care in-patient unit with severe cancer pain were treated with morphine, a type of opioid. Their vital statistics were monitored before and after the pain was controlled and there were no significant changes. Morphine did not cause respiratory depression, the mechanism by which lethal opioid overdose typically kills.

“Unlike many other drugs, morphine has a very wide safety margin,” wrote Dr Rob George, Consultant in Palliative Medicine, from the University College London, in his commentary about the research. “Evidence over the last 20 years has repeatedly shown that, used correctly, morphine is well tolerated, does not cloud the mind, does not shorten life, and its sedating effects wear off quickly. This is obviously good for patients in pain.”

“There is no evidence to suggest that morphine is a killer,” Dr George continued. “It could be perceived that not to give it is an act of brutality. We urge those in the medical community to understand the facts about morphine and other opioids – it’s time to set the record straight. Doctors should feel free to manage pain with doses adjusted to individual patients so that the patients can be comfortable and be able to live with

dignity until they die.”

The articles, “Respiratory function during parenteral opioid titration for cancer pain” and, “Commentary: Lethal Opioids or dangerous prescribers?,” published by SAGE in the March issue of Palliative Medicine, are available at no charge for a limited time at <http://pmj.sagepub.com/cgi/reprint/21/2/81> and <http://pmj.sagepub.com/cgi/reprint/21/2/77>.

Source: SAGE Publications

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