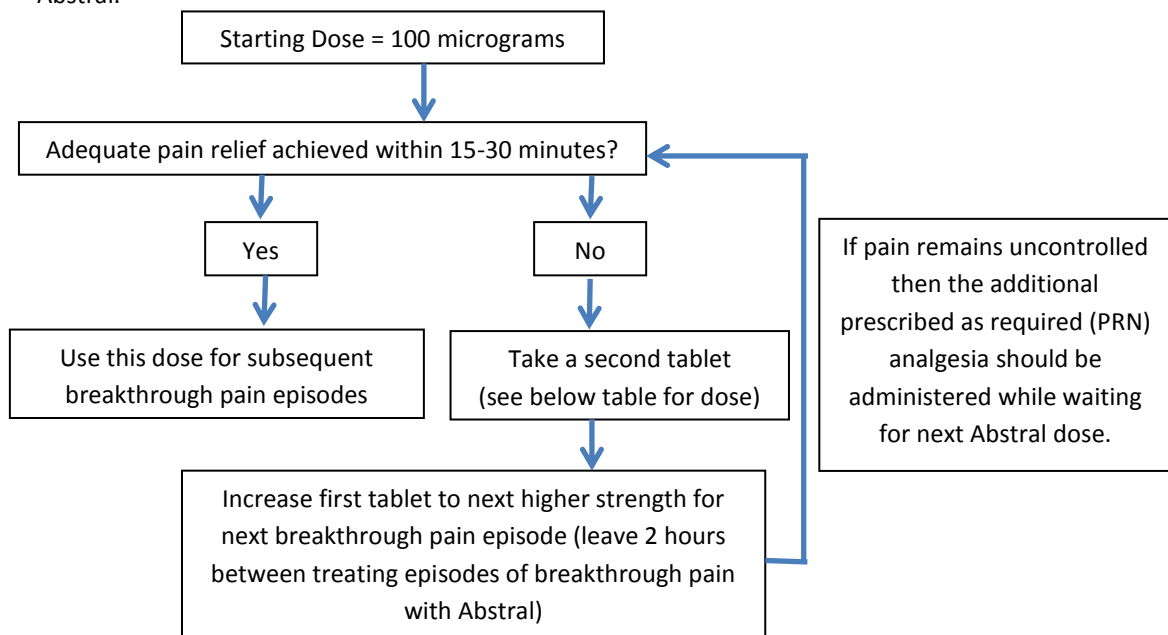


Abstral® Dose Titration Guideline

- Abstral is sublingual fentanyl.
- Only to be used on the advice of the Specialist Palliative Care Team.
- Abstral should only be administered to patients who are tolerant to opioid therapy e.g. take at least 60 mg of oral morphine daily or at least 25 micrograms per hour of fentanyl patch or at least 30 mg of oxycodone daily for a week or longer.
- Abstral is to be used for incident pain.
- Abstral sublingual tablets should be administered directly under the tongue at the deepest part. Abstral sublingual tablets should not be swallowed, but allowed to completely dissolve in the sublingual cavity without chewing or sucking. Patients should be advised not to eat or drink anything until the sublingual tablet is completely dissolved.
- In patients who have a dry mouth water may be used to moisten the buccal mucosa before taking Abstral.



First Tablet	Second Tablet
100 micrograms	100 micrograms
200 micrograms	100 micrograms
300 micrograms	100 micrograms
400 micrograms	200 micrograms
600 micrograms	200 micrograms
800 micrograms	-

- No more than 4 tablets should be taken for a single episode of breakthrough pain. All strengths are available from pharmacy- please order via your CD order book.
- Patients should receive no more than 4 doses of Abstral a day.
 - If the frequency of breakthrough pain episodes is more than 4 per day, the background pain medication should be reassessed and the Palliative Care Team should be contacted.
- If the breakthrough pain episode is not relieved patients must wait at least 2 hours before treating another episode of breakthrough pain with Abstral.
 - However, if pain remains uncontrolled then any additional prescribed as required (PRN) analgesia (e.g. immediate release morphine or oxycodone) should be given to the patient.

References:

- 1. Abstral SPC Prostraken 04/04/2014
- 2. <http://www.abstral.com/about-abstral/dosing-administration#titration>
- 3. <http://www.bsuh.nhs.uk/patients-and-visitors/patient-information-leaflets/search-for-a-leaflet/?entryid52=509076&q=0%7efentanyl%7e&catid=0>

- Different formulations of fentanyl have differing pharmacokinetic profiles.
 - Do not mix and match different brands of fentanyl sub-lingual preparations: if a brand switch is required a dose re-titration is required.
 - Prescribing is to include the brand being used to avoid potential for confusion and errors.
- All patients should be provided with the patient information leaflet 'Fentanyl sublingual tablets (Abstral®)' available on the BSUH Trust Infonet via the Palliative Care Team webpage or Patient Information Leaflets webpage.

Please see below for an example of how to prescribe Abstral in the first instance, the additional instructions have been enlarged for ease:

AS REQUIRED PRESCRIPTIONS

<i>1st dose</i>	DRUG (APPROVED NAME) FENTANYL (ABSTRAL)				Date			
	Dose 100 MICROGRAM	Max. Frequency Q.D.S	Route S/L	Start Date	Time			
Prescriber Name & Signature				Bleep	Dose / Route			
Additional Instructions/Indication IF NOT EFFECTIVE AFTER 15 MINUTES CAN TAKE ONE MORE 100MICROGRAM TABLET AND INCREASE TO 200MG FOR NEXT EPISODE OF PAIN				Pharmacy	Given			
<i>2nd dose</i>	DRUG (APPROVED NAME) FENTANYL (ABSTRAL)				Date			
	Dose 200 MICROGRAM	Max. Frequency Q.D.S	Route S/L	Start Date	Time			
Prescriber Name & Signature				Bleep	Dose / Route			
Additional Instructions/Indication IF NOT EFFECTIVE AFTER 15 MINUTES A 100MICROGRAM TABLET CAN BE TAKEN (REFER TO FIRST DOSE PRESCRIPTION)				Pharmacy	Given			

References:

- 1. Abstral SPC Prostraken 04/04/2014
- 2. <http://www.abstral.com/about-abstral/dosing-administration#titration>
- 3. <http://www.bsuh.nhs.uk/patients-and-visitors/patient-information-leaflets/search-for-a-leaflet/?entryid52=509076&q=0%7efentanyl%7e&catid=0>