Fentanyl Patches
Fentanyl Patches

**Other names:** Durogesic D-trans®, Matrifenn®, Durogesic®, Tilofyl®.

You should stay on the same brand of fentanyl unless your doctor changes it. Check the name of the medicine on the box. Fentanyl is a strong opioid pain medication.

**What is fentanyl used for?**

Fentanyl is used for moderate to severe pain that has not been well controlled on other regular pain killers. Fentanyl is used to control on-going pain. It is not used for pain that only lasts for a short time. You will be given a different, quick acting pain killer for breakthrough pain if you need it.

**How do I take fentanyl?**

The fentanyl is inside a patch with a sticky back that is stuck on to the skin. The medicine passes from the patch through the skin into the body. Each patch is used once. The patches are waterproof so you can have a shower or go swimming. **It is important to check every day that the patch is stuck on securely, especially the edges.**

**How long does a fentanyl patch last?**

Each patch lasts for three days. Change your patch (or all your patches) every third day, at about the same time of day. Use a calendar to record the day when you need to change your patch. You should not stop using fentanyl suddenly.
How do I change my patch?

1 Wash your hands before and after changing your patch. Used patches still contain some of the medicine so need to be disposed of carefully. Take the old patch off, fold it in half as soon as it is removed so that it sticks together firmly and put it back in its original packet. Dispose of the folded patch safely so that it is not picked up by others (especially children), it can be put in the bin with your household rubbish. Return any unused patches to your pharmacy.

2 Choose a place on the upper body or upper arm. The skin should not have any cuts, scars or spots and should not be too hairy. Clean the skin with water only – not soap. Make sure it is cool and completely dry.

3 Tear the packet with the new patch open. Peel off the plastic backing. Stick the patch on to the clean area of skin. Press it on firmly. Do not stick the patch on the same place twice in a row.

4 Keep patches, like all medicines, in a safe place and away from children.

What do I do if a patch falls off or I forget to change it?

Stick a new one on as soon as you can. If you are very late changing your patch, you may need to take another pain killer until the fentanyl starts working again.
What should I do if I still get pain while using fentanyl?

When you first start fentanyl or the dose is increased it takes time to work. Your doctor will give you extra pain killers to take if you need them until your patch is working. Some people find that doing certain things like having a bath or going for a walk brings on pain. Your doctor or nurse may suggest you take a quick acting pain killer before you start doing something that brings on pain. If your pain is not well controlled and you need to take more than 2-3 doses of extra pain killer a day, tell your doctor or nurse.

How will I know if fentanyl is not going to work for some of my pain?

Although fentanyl is a very good pain killer, it does not help all types of pain. You may still have pain despite using bigger doses of fentanyl and may feel unwell if the dose is too high. The symptoms of having too high a dose of fentanyl are given below. Tell your doctor or nurse if this happens. Your doctor may need to reduce your dose of fentanyl and suggest other treatments to help the pain.

Are there any side effects from using fentanyl?

Fentanyl is a safe and effective pain killer but can have side effects. It is important to know when the dose might be too high.

Too high a dose of fentanyl:

Contact your doctor or nurse if you:

- are more sleepy than usual
- become muddled or confused
- have more difficulty walking or talking than usual.
**Constipation:**
Fentanyl tends to cause less constipation than some other strong pain killers but you may still need to take a laxative regularly.

**Skin/rash irritation:**
If you develop itching or redness under the patch, tell your doctor or nurse.

**Changing from another pain killer:**
A few people who change from another pain killer to fentanyl feel unwell in the first 24 – 48 hours with sickness, shivering, stomach pains or diarrhoea. Contact your doctor if this happens.

**How does heat affect my patch?**
Heat speeds up the way the fentanyl is released from the patch.

- Avoid direct heat on the patch like a hot water bottle, electric blanket, heat pad, or heat lamp.
- Do not soak in a hot bath or sunbathe while using fentanyl patches.
- If you develop a fever, try to keep your temperature down and contact your doctor if your temperature is 39° or higher.

**What do I do if my patch falls off frequently?**
Sweating or applying the patch to hairy skin may prevent it sticking well. Your nurse can give you some sticky tape or a dressing to keep the patch on. Clipping or shaving excess hair may be needed in some people – do not use shaving foam, gel or soap as they affect the way the medicine goes into the skin.
What happens if my patch falls off and sticks to another person?

If the patch accidentally sticks to somebody else’s skin, remove it and get medical help immediately.

Can I drive?

Once you get used to the fentanyl patch (strong opioid pain medication) and do not feel sleepy or unwell you may be able to drive. **You must discuss this with your doctor first.** You must not drive if you feel that your driving may be impaired by pain, your condition or medication. Following recent advice from the Department of Transport please carry evidence that you have been prescribed fentanyl patches (a strong opioid pain medication) by a doctor, in case you are stopped by the Police.

Can I drink alcohol?

A small glass of wine, beer, sherry or whisky is usually permitted, but you should discuss this with your doctor. It is best to avoid more than a small drink otherwise you may become too drowsy.

Any questions?

If you have any questions about your fentanyl or other medicines, please ask your community nurse, GP or community palliative care nurse, if you have one.