

Methadone protocol

DAY 1 OPIOID TREATED

- Stop previous opioid
- Methadone dose = $1/30^{\text{th}}$ previous 24h OME
- given ≥ 3 hourly PRN. Max 30mg per dose
- Breakthrough medication < 3 hourly = previous opioid

DAY 1 OPIOID NAÏVE

- Methadone dose = 2.5mg given ≥ 3 hourly PRN.
- Breakthrough medication < 3 hourly = morphine

Day 2

DOSE

Convenient increment ($1/4 - 1/3$) if necessary

BREAKTHROUGH

< 3 hourly = previous opioid

Days 3-6

DOSE

$\frac{\text{Total day 2 dose}}{3}$ given tid

BREAKTHROUGH

- Day 3-6 individual methadone dose ≥ 3 hourly PRN
- < 3 hourly = previous opioid

Day 7 onwards

DOSE

8 hourly doses increased by convenient increment if necessary

BREAKTHROUGH

$1/10^{\text{th}}$ 24h methadone dose \geq hourly PRN

Parenteral

- sc methadone = $1/2$ oral dose
- follow principles detailed above, followed by csci after day 7
- csci skin reactions reduced by maximal dilution in 0.9% saline

COMPATIBLE WITH

- Dexamethasone
- Haloperidol
- Metoclopramide
- Midazolam

Caution with

EFFECT INCREASED WITH

- Amitriptyline
- Cimetidine
- Fluconazole
- Macrolide antibiotics

EFFECT DECREASED WITH

- Carbamazepine
- Phenytoin
- Phenobarbital
- Rifampicin

Watch for

Monitor

Toxicity

accumulating toxicity during titration, particularly at 3-6 days

- consciousness level
- respiratory rate
- arterial oxygen desaturation

Treatment

Naloxone 0.2mg slowly i.v. repeated at 5-minute intervals as needed

May need to repeat total dose so far after 30 minutes and 60 minutes

If third dose needed, commence simultaneous infusion of 66% of total initial dose/h, for 12-24h

Re-titrate methadone or consider alternative opioid