

RESULTS of HYDROMORPHONE SURVEY of Palliative Care Physicians within the UK and Ireland

Questionnaires

Sent Out = 310
Returned = 231 (75%)

Returned Blank = 9 (4%)
Evaluable = 222 (96%)

The reasons given for the nine returned blank questionnaires returned were:

- a) No Palliative care Consultant in situ
- b) Questionnaire already completed

1. Do you use Hydromorphone as a S.C. infusion?

YES 23 / 222 (10%)
NO 199 / 222 (90%)

Of the 23 (10%) Palliative Care Physicians who said they had used Hydromorphone as a S.C. infusion, seven physicians could not remember any of the other drugs added although four stated that they could recall the no problems were encountered. Therefore the results on the table below are for the 16 physicians who completed all of the questionnaire on their experience of using the additives.

SC Infusion Hydromorphone	ADDITIVE	RESULTS		Please circle	your responses	
No of Physicians who have used it with:		Precipitation	Cloudy Appearance	Any apparent problem with compatibility	If YES Please specify	Dilutant used
8 / 16	Hyoscine Hydrobromide	No 8	No 7	No 7	Skin reaction 1	WATER 7
10 / 16	Hyoscine Butylbromide	No 10	No 9	No 9	Skin reaction 1	WATER 9
15 / 16	Midazolam	No 14	No 13	No 14	Skin reaction 1	WATER 14
13 / 16	Levomepromazine	No 12	No 11	No 12	Skin reaction 2	WATER 11
11 / 16	Haloperidol	No 10	No 9	No 10	Skin reaction 1	WATER 10
9 / 16	Metoclopramide	No 8	No 7	No 8	Skin reaction 1	WATER 7
7 / 16	Cyclizine	Yes No 1 6	No 5	Yes No 1 5	Skin reaction 2	WATER 5
6 / 16	Dexamethasone	Yes No 1 3	Yes No 1 2	Yes No 1 2	Skin reaction 0	0.9% Saline 1 WATER 2
6 / 16	Octreotide	No 6	No 5	No 5	Skin reaction 1	WATER 4
3 / 16	Other - please specify	No 3	No 2	No 2	Skin reaction 0	0.9% Saline 1

8 / 16 had mixed Hydromorphone in a S.C. infusion with 3 or 4 of the above.

All mixtures of 3 drugs were mixed with water with no apparent evidence of physical incompatibility or of site reactions. Although, it is worthy of note from one physician who stated that precipitation can occur with higher doses of Hydromorphone.

Some physicians commented that Hydromorphone is difficult to locate in the UK and would use it if was readily available. In Ireland, however, where availability of Hydromorphone is not a problem availability of diamorphine certainly is a problem. Given that this survey was conducted with palliative care physicians within the UK and Ireland the factor of drug availability should be taken into account when interpreting these results.