

Methadone Information for Patients and Families

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Your clinician has prescribed methadone for pain or shortness of breath. The following information addresses questions frequently asked by patients or families about this medication:

What is methadone?

- Methadone is an opiate medication in the same family as morphine.
- It is used to treat many types of pain or to help with breathing.
- It is NOT related to methamphetamines (“meth”). Although methadone is used to treat heroin addiction, the use of methadone for pain or shortness of breath is very different from its use for treating addiction.

Why choose methadone?

- Methadone is the only long-acting opiate that comes in a liquid form and a tablet that can be divided or crushed. This allows it to be used when swallowing pills is difficult.
- It may be more helpful for nerve pain than the other opiates.
- Methadone may be beneficial in treatment of pain when side effects of other opiates limit any further dose increase.

What should I know about methadone?

- Methadone should be used only for chronic or cancer pain—it is usually not used for acute or short-term pain.
- The best pain relief occurs if methadone is taken at regular times around the clock, usually every 8 hours.
- Methadone can take longer than other opiates to reach full effectiveness. Significant pain relief may take up to 3–5 days after a methadone dose change. Because of this, your clinician may need to wait 3–5 days between dose adjustments and will prescribe a fast-acting pain medication to use, as needed, for breakthrough pain during this time.
- As with many medications, response varies among individuals. It is important to monitor and report your response and any possible side effects to your health care team.
- Never stop, start, or adjust methadone dose without clinician approval.
- Methadone should NEVER be used by someone other than the person for whom it is prescribed. If used incorrectly, methadone can cause sedation, slowed breathing and even death.

Are there side effects?

- Constipation is common with any opiate and rarely resolves without treatment. Medications to prevent constipation are recommended with start of methadone treatment.

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- In rare cases, methadone may cause increased sleepiness or slowed breathing. Call your care team if these symptoms occur while taking methadone. Do not adjust or stop the methadone without discussing with your care team.
- All opiates may cause drowsiness, mild confusion, nausea or itching. Any new symptoms should be reported. Some side effects may go away over time with continued use of the medication.
- Some medications may interact with methadone. Nonprescription items such as St. John's wort, cimetidine (Tagamet), and grapefruit juice may affect levels of methadone. It is important to review your medications with your care team and let them know before making any changes in medication (including non-prescription) while you are taking methadone.

Your care team will be able to answer any other questions you might have, so please ask if there is something else you would like to know about this medication.

Care team can be reached at: _____

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