

*From the Chief Medical Officer
Dr Michael McBride*



Department of

**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

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Your Ref:

Our Ref: HSS(MD)44/2008

Date: 17 December 2008

HSS(MD)44/2008

For action:

Medical Directors of HSC Trusts

for onward cascade to frontline doctors

Directors of Nursing of HSC Trusts

for onward cascade to frontline nurses and midwives

Regulation & Quality Improvement Authority

for onward cascade to nursing homes and private clinics

For information:

Chief Executives HSC Trusts

Medical Director of NIAS

Chief Executives HSS Boards

Directors of Public Health HSS Boards

Directors of Nursing HSS Boards

GAIN

Safety Forum

Mr John Leckey, Senior Coroner

Dear Colleague

PARENTERAL OPIOIDS AND AIRWAY OBSTRUCTION

Background

In relation to an ongoing Coroner's inquest into the death of a patient receiving parenteral morphine, I wish to alert you to the possibility that a small number of patients receiving parenteral opioids may be at risk of airways obstruction, particularly when sleeping or if drowsy.

You need to be aware that these patients may not fit the typical picture of patients at risk of obstructive apnoea. In addition, these patients often have a normal respiratory rate as the underlying mechanism is airway obstruction rather than respiratory depression. Equally, however, respiratory depression is also a risk in patients on parenteral opioids and you should be alert to the separate mechanisms of obstruction and/or respiratory depression in any patient on parenteral opioids.

Prevention

This issue has been raised with the Royal College of Anaesthetists to provide guidance on how to monitor patients on parenteral opioids to cover both the risk of respiratory depression and the risk of obstructive apnoea.

As an interim precautionary measure for all patients on parenteral opioids, oxygen monitoring should be used if there are clinical concerns about a patient. Staff should use oxygen with care and should understand that while oxygen can assist patients with respiratory depression, it can also mask the signs of obstructive apnoea as oxygen saturation levels can be normal in patients who have intermittent obstructive apnoea but are on oxygen therapy.

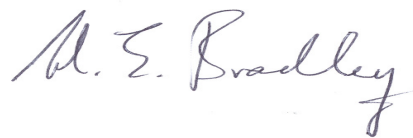
Action for Medical Directors and Directors of Nursing in HSC Trusts

Medical Directors and Directors of Nursing in HSC Trusts should make frontline medical and nursing staff in their Trusts aware of the issues in this letter.

Yours sincerely



Dr Michael McBride
Chief Medical Officer



Mr Martin Bradley
Chief Nursing Officer

cc: Mr Norman Morrow CPO
Mr Jim Livingstone
Dr Heather Livingston

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