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CHINESE FAMILY CAREGIVERS' PERCEPTION ON OPIOIDS AS ANALGESIC – INSIGHTS FROM CHICAPO SURVEY

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Background

Misconceptions about morphine and opioids as analgesic in cancer pain are thought to be common, however, prevalence among local Chinese was unknown.

Objectives

To study the prevalence of misconceptions about opioids among family caregivers of advanced cancer patients receiving palliative care and its correlation with caregivers’ characteristics.

Method

This was a single centre cross- sectional study. A 20-item questionnaire on the common misconceptions about opioid use was developed. Family caregivers were invited to join the study by convenience sampling. Consented caregivers provided their demographics and rated their agreement with the 20 items using a Likert scale from 1 (*very disagree*) to 5 (*very agree*). Descriptive statistics was used for data analysis and Chi Square test was used for comparison between groups.

Results

A total of 100 caregivers (median age 56 years old) completed the questionnaire, 60% were female and 77% were main caregivers. The 3 most common agreed/strongly agreed items (misconceptions) were:

- Morphine should be reserved for very severe pain only
- Morphine is only used in late but not early stage cancer patients
- Morphine has ceiling effect in pain control

The 3 most common disagreed/very disagreed items (least misconceptions) were:

- It is shameful to tell others that I am prescribed with morphine
- Morphine should not be given to patients even with doctor’s prescription
- Morphine should not be used because of the historical pain from Anglo- Chinese Opium Wars

In 14 out of 20 items, caregivers with misconceptions were significantly older. (all p<0.05)
Half or near half of the caregivers disagreed that morphine is associated with euthanasia (p =0.023) or hastening death (p= 0.013), especially for main caregivers.
The caregivers’ answers were not correlated with the patients’ demographics.

Conclusions

Our study has identified that misconceptions about opioids are common especially among the older caregivers, more attention and education are required.

20- item questionnaire		Agree / strongly agree (%)	Neutral/ don't know (%)	Disagree/ strongly disagree(%)
1.	The prescription of morphine implies that doctor predicts patient has a graver prognosis .	37	22	41
2.	Patient will get addicted even if this is used under doctor’s instruction	26	32	42
3.	Morphine is the last resort for cancer pain control.	15	28	57
4.	Morphine is only indicated in late stage patients but not in the earlier stages.	17	22	61
5.	A patient is addicted to morphine when he requires a larger and larger doses.	33	23	44
6.	Morphine should be reserved for very severe pain only.	11	12	77
7.	The practice of a doctor to prescribe morphine is the same as to practise euthanasia.	60	16	24
8.	Taking morphine as a pain killer hastens death.	49	39	12
9.	One should try to tolerate cancer pain as much as possible to minimise use of morphine.	62	13	25
10.	One cannot take morphine as analgesics if he is receiving other drug treatment, chemotherapy or radiotherapy.	15	66	19
11.	It is shameful to tell the others if I myself or my family members were prescribed with morphine	88	4	8
12.	Treating cancer pain with morphine is regarded as an alternative medicine.	55	33	12
13.	Morphine has ceiling effect: its analgesic effect plateaus if the ceiling dose is reached.	6	35	59
14.	Elderly, as they are physically weaker, should not receive morphine as painkillers.	45	31	24
15.	Chinese should not use morphine as pain killers due to the historical pain from Anglo- Chinese Opium Wars.	70	18	12
16.	Morphine cannot be taken together with other traditional Chinese herbal medicine.	21	53	26
17.	I will not give opioids to my family members even if it is a cancer pain analgesic prescribed by doctor.	80	8	11
18.	Even morphine is prescribed at regular dose, one should take it only when there is pain.	32	12	56
19.	The only role of strong opioids is to relieve pain but not other symptoms.	14	38	48
20.	Doctors switch a strong opioid analgesic to methadone when patients got opioid addiction.	16	57	27