

10. Changes to prescriptions



Client initiated changes to prescriptions

From time to time, you may wish to request a review of your prescription; for example, you might want to move to a new pharmacy, or need your dispensing arrangements changed.

AOTS policy is that, wherever possible, changes to prescriptions will happen when a new prescription is due to be written.

- Keep track of the dates of your own prescriptions so that you know when a new script is due to be written.
- If you lose track of the dates, you can contact your key worker or doctor and find out when your next prescription is due.
- If you have a date to enter hospital for any reason or you unexpectedly end up in hospital, let AOTS know so they can liaise with the medical staff involved in your hospital care and reorganise your scripting.
- Depending on what your request is, changes may not come into effect straight away; you might be asked to wait until your next script.
- If changes to your script are necessary, you need to discuss this with your key worker or doctor before your next prescription is due. For practical reasons AOTS needs at least 3 working days' notice to make the change.
- Changes to prescriptions are often not possible at short notice. If you have an emergency situation you'll need to contact your key worker who will assess your circumstances individually and assist you where possible. If your key worker is away another key worker from your local AOTS team will help you.

If you're receiving Shared Care with your GP:

- There may be fees for extra prescriptions or changes to dispensing. Ask your GP about this.
- AOTS can continue to assist you and your GP to find a new pharmacy, if you move house or workplace and want to find a more convenient pharmacy. Give your key worker or local AOTS team a call if this applies to you.

Service initiated changes to prescriptions

New Zealand law requires that only an authorised registered medical practitioner can change your prescription. A pharmacist cannot change your prescription without specific authorisation from the prescriber.

- The only exception to this is that an AOTS staff member or pharmacist can cancel a medication or takeaway dose due to unexpected circumstances (e.g. you're admitted to hospital) or concerns about your stability. (see Info Sheet 6 Indicators of Stability).
- In the event of prescription or dose cancellation you will be informed by phone so it's important that AOTS has your current phone number. If you can't be contacted, you'll get a letter at the pharmacy or at your home address, stating the reasons for cancellation. If this happens, you need to contact your key worker as soon as possible.

Also available:

1. Opioid treatment with AOTS
2. Facts about methadone
3. First methadone dose and stabilisation
4. Accidental overdose
5. Ongoing Opioid Substitution Treatment (OST)
6. Indicators of stability
7. Clinical tests: blood, urine, etc.
8. Restabilisation
9. Pharmacy dispensing
10. Changes to prescriptions
11. Holiday arrangements within NZ
12. Travelling overseas
13. Methadone takeaways
14. Shared Care with your GP
15. Thinking about coming off?
16. Involuntarily withdrawal
17. Pregnancy and opioid treatment
18. Methadone and medication interactions
19. Driving and OST
20. Finding a GP

Facts about buprenorphine (Suboxone®)

Suboxone® treatment with CADS

Changes to prescriptions when reducing your dose and/or coming off

When you're withdrawing off medication or decreasing to a lower dose changes to prescriptions can be made if the script allows for it. When a doctor writes your script for reducing doses you can ask them to allow for some flexibility in dose range so that you can tell the dispensing pharmacist if you want to halt the reduction or slow it down.

It's important to listen to your body when you're coming down and use it to gauge whether to continue reducing at the same rate or change the rate to a smaller amount or even to stop reducing altogether for a while – to "plateau". Everyone's different: for some people dropping 2ml (10mg) of methadone per fortnight is not a problem when they are on higher doses, then they change to half a ml (2.5 mgs) at a time when their dose is getting low; but for others these kinds of drops might be too much all at once.

If you want to keep reducing but at a gentler pace you can ask the pharmacist to give you smaller dose reductions. It's a good idea to let your pharmacist know in advance how much you're planning to reduce before your next pick-up, as most pharmacists prepare your takeaways in advance.

Reducing methadone

Once you reach a dose of 20 mgs or less you can ask the doctor to change the prescription to a different methadone formulation i.e. to change from the 5:1 (5 mgs per ml) formulation to the 2:1 (2 mgs per ml), as it's easier to measure out ½ mg with the 2:1 formulation. The pharmacist might need to specially order the new formulation so the change may not happen immediately.

If you find your dose isn't holding you (usually once you're on doses of 30mg or less), you can talk to the doctor about split dosing. (Split dosing has to be written on the script before the pharmacist can change from all-at-once dosing).

Although the service is reluctant to institute split dosing of methadone without strong indications that it's necessary, it may be appropriate for stable clients in the latter part of a planned methadone withdrawal because it reduces the discomfort that can start to kick in each day before you have your dose, and it can increase the likelihood of a successful withdrawal.

If you feel your dose isn't holding you and you want to go back up you need to speak to your key worker because scripts with flexible dosing options are usually written for reductions not increases, and the pharmacist can't up your dose until they get a new script.

It's a good idea to keep in close communication with your key worker during this time for support, plus they can often help in educating the pharmacist around dose reductions or maybe even suggest a change of pharmacy if that's what's needed.

Need to know more?

If you need more information about changing prescriptions please speak with your key worker, the doctor or local AOTS team. For more information sheets, see CADS reception or visit the CADS website - www.cads.org.nz/More/Brochures.asp

