

Equianalgesic Chart: Approximate equivalent doses of opioids for moderate to severe pain. (cont'd)

ANALGESIC	PARENTERAL (IM, SC, IV) ROUTE ^{1,2} (mg)	PO ROUTE ¹ (mg)	COMMENTS
AGONIST-ANTAGONIST OPIOIDS: Not recommended for severe, escalating pain. If used in combination with mu agonists, may reverse analgesia and precipitate withdrawal in opioid-dependent patients.			
BUPRENORPHINE (Buprenex)	0.4	—	Not readily reversed by naloxone; NR for laboring patients.
BUTORPHANOL (Stadol)	2	—	Available in nasal spray.
DEZOCINE (Dalgan)	10	—	
NALBUPHINE (Nubain)	10	—	
PENTAZOCINE (Talwin)	60	180	

Selected References For more complete information and additional references, see: Pasero C, Portenoy RK, McCaffery M: Opioid analgesics. pp. 161-299. In: McCaffery M, Pasero C: **Pain Clinical Manual**, St. Louis, 1999, Mosby, pp. 241-243.

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Equianalgesic Chart

Approximate equivalent doses of PO nonopioids and opioids for mild to moderate pain

ANALGESIC	PO DOSAGE (MG)
Nonopioids	
Acetaminophen650
Aspirin (ASA)650
Opioids[†]	
Codeine32-60
Hydrocodone ^{††}5
Meperidine (Demerol)50
Oxycodone ^{†††}3-5
Propoxyphene (Darvon)65-100
† Often combined with acetaminophen; avoid exceeding maximum total daily dose of acetaminophen (4000 mg/day).	
†† Combined with acetaminophen, e.g., Vicodin, Lortab.	
††† Combined with acetaminophen, e.g., Percocet, Tylox. Also available alone as controlled-release OxyContin and immediate-release formulations.	

Selected References: For more complete information and additional references, see: McCaffery M, Portenoy RK: Nonopioids: Acetaminophen and nonsteroidal antiinflammatory drugs. pp. 129-160. In: McCaffery M, Pasero C: **Pain: Clinical Manual**, St. Louis, 1999, Mosby, p. 133.

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■ From McCaffery M, Pasero C: **Pain: Clinical Manual**, Copyright©, 1999, Mosby.

A Guide to Using Equianalgesic Charts

- Equianalgesic means approximately the same pain relief.
- The equianalgesic chart is a guideline. Doses and intervals between doses are titrated according to individual's response.
- The equianalgesic chart is helpful when switching from one drug to another, or switching from one route of administration to another.
- Dosages in the equianalgesic chart for moderate to severe pain are not necessarily starting doses. The doses suggest a ratio for comparing the analgesia of one drug to another.
- For elderly patients, initially reduce the recommended adult opioid dose for moderate to severe pain by 25% to 50%.
- The longer the patient has been receiving opioids, the more conservative the starting doses of a **new** opioid.