



# OPIOID CONVERSION GUIDE

These conversions are a guide only.  
 Patients may vary in their response to different opioids. After changing opioid, close assessment should follow and the dose altered as necessary.

## Equianalgesic doses of oral opioids

Oral Opioid	Conversion factor (opioid dose X or ÷ by factor = morphine dose)	Practical equianalgesic dose
morphine		10 mg
hydromorphone	X 5	2 mg
oxycodone	X 1.5	5 – 7.5 mg*
codeine	÷ 8	75 – 90 mg*
tapentadol	÷ 3	50 mg*
tramadol	÷ 5	50 mg

\* dose guided by strength of medication available

**Methadone** conversions are complicated and prescribing should be restricted to medical specialists with experience of methadone prescribing for pain management.

## Subcutaneous route conversions

Opioid	Oral dose	Conversion factor (oral dose ÷ by factor = subcut dose)	Equianalgesic subcutaneous dose
morphine	30 mg	÷ 3	10 mg
hydromorphone	6 mg	÷ 3	2 mg

## Transdermal preparation conversions

Opioid	Patch strength	Equianalgesic oral morphine dose
buprenorphine	5 microgram/hr	12 mg/24 hrs
fentanyl	12 microgram/hr	30 – 45 mg/24 hrs

## Sublingual preparation conversions

Opioid	Dose	Equianalgesic oral morphine dose for pain
buprenorphine tablet	200 microgram	8 – 16 mg
fentanyl tablet	100 microgram	no direct conversion initiate lowest dose and titrate to effect
fentanyl lozenge	200 microgram	