Oxycodone

Controlled-release oxycodone is an effective analgesic for the management of steady pain, paroxysmal spontaneous pain, and allodynia, which frequently characterize postherpetic neuralgia.¹⁾.

Supplied: usually available in combination as:

aspirin 325 mg with oxycodone 5 mg (Percodan®) or acetaminophen (APAP) (Tylox® = APAP 500 mg + oxycodone 5 mg)

(Percocet ® = oxycodone/APAP in 2.5/325, 5/325, 7.5/500, 10/650)

dose: 1 PO q 3-4 hrs PRN (may increase up to 2 PO q 3 hrsa)

Supplied: also available alone as OxyIR® 5 mg, OxyFast® oral solution of 20 mg/ml, or in controlledrelease tablets as OxyContin® 10, 20, 40, 80b & 160b mg (which last 12 hours, achieving steady state in 24–36 hours).

R Adult: OxyContin® tablets are taken whole and are not to be divided, chewed, or crushed. It is intended for the management of moderate to severe pain when a continuous around-the-clock analgesic is needed for an extended period of time and is not intended for use as a PRN analgesic. For opiate naive patients, start with 10 mg PO q 12 hrs. For patients on narcotic medications, a conversion table is provided below for some medications. Titrate dose every 1–2 days, increasing dose by 25–50% q 12 hrs.

1)

Watson CPN, Babul N. Efficacy of oxycodone in neuropathic pain: a randomized trial in postherpetic neuralgia. Neurology. 1998; 50:1837-1841

From: https://neurosurgerywiki.com/wiki/ - **Neurosurgery Wiki**

Permanent link: https://neurosurgerywiki.com/wiki/doku.php?id=oxycodone



