

Letters

CMAJ publishes as many letters from its readers as possible. However, since space is limited, choices have to be made, on the basis of content and style. Letters that are clear, concise and convenient to edit (no longer than two double-spaced typescript pages, or 450 words) are more likely to be accepted. Those that are single-spaced, handwritten or longer than 450 words will usually be returned or not published. We reserve the right to edit letters for clarity and to abridge those that are unduly long or repeat points made in other letters, especially in the same issue.

MS Contin: errors in prescribing, dispensing and administering

Two recent errors in the prescribing, dispensing or administering of the newly released product MS Contin — sustained-release morphine sulfate, available as tablets of four strengths (15, 30, 60 and 100 mg) — prompt an advisory.

On one occasion an 18-year-old woman taking two 60-mg MS Contin tablets twice a day at home was admitted to hospital. An order for "morphine sulfate 120 mg (MS Contin) p.o. b.i.d." was filled in the pharmacy as four 30-mg tablets of regular short-acting morphine sulfate (the hypodermic formulation). The four tablets were then administered to the patient as a single dose. She had a period of marked drowsiness but no other adverse effects.

On the second occasion a 56-year-old woman who in hospital had been taking one 15-mg tablet (white) of the same preparation of short-acting morphine sulfate every 4 hours received when she was out of hospital a prescription from her community physician for MS Contin, 15 mg (green tablet) every 4 hours around the clock. After 3 days of this regimen the patient complained of severe nausea and restlessness, which prompted a call to our palliative care team. Reviewing the colour of the pa-

tient's tablets and their imprints quickly revealed the error. Not only had the physician incorrectly prescribed the medication, but also the pharmacist had not recognized the error and had dispensed a product with a label advocating administration every 4 hours for a product usually taken only twice a day.

MS Contin provides much-needed simplification of pain control regimens, but its use must be correct. The 1986 edition of the *Compendium of Pharmaceuticals and Specialties (CPS)* contains no information about the use of this long-acting preparation other than to say it is a sustained-release product. It is hoped that the manufacturer will include detailed prescribing information in the next edition of *CPS*. The available product monograph provides the details.

In the meantime, I suggest that the two types of prescription read as follows: "short-acting morphine sulfate tablets [or Staxet, when the commercial preparation is preferred], X mg q4h around the clock" and "morphine sulfate sustained-release tablets, X mg q12h". According to the product monograph, the dosing interval for MS Contin should be 12 hours initially and should subsequently never fall below 8 hours.

F.I. Burge, MD
Palliative Care Team
Chedoke-McMaster Hospitals
and Department of Family Medicine
McMaster University
Hamilton, Ont.

[The manufacturer replies:]

We share Dr. Burge's concerns regarding the need for greater awareness and understanding of the differences between immediate-release and sustained-release (MS Contin) morphine sulfate tablets.

The reason for the limited information on MS Contin in the 1986 edition of *CPS* is that the copy deadline passed before we received approval of the monograph from the Health Protection Branch (HPB) of the Department of National Health and Welfare; a manufacturer must have an HPB "notice of compliance" before releasing an approved monograph.

However, we do not rely solely on *CPS* to distribute information on our products. Before introducing MS Contin we mailed a product monograph to Canadian poison control centres, hospital pharmacies, drug wholesalers, oncologists and pain consultants. In addition, complete prescribing information is continually being provided by our representatives.

Every bottle of MS Contin is shipped with detailed prescribing information, and this information has also regularly appeared in *CMAJ*, the *Medical Post*, *Medigram*, the *Canadian Journal of Hospital Pharmacy* and several other professional journals. A complete monograph on MS Contin will appear in a forthcoming *CPS* update, to be published in the *Canadian Pharmaceutical Journal*.