## ONSET, PEAK AND DURATION OF COMMON PAIN MEDICATIONS

Medication	Onset of Action (minutes)*	Peak Effect (hours)*	Duration of Action (hours)*	Route of Admin.	Comments
		Non-Op	ioid Analgesics	•	
Acetaminophen	30-45	0.5-1	4-6	Oral	Headache, nausea, vomiting May cause hepatic complications in doses over 3000mg/24hr in the elderly
Ibuprofen	Analgesia: 30-60 Anti-inflammatory: Up to 7 days	Analgesia: unknown  Anti-inflammatory: 1-2 weeks with routine administration	Analgesia: 4-6	Oral	Nausea, vomiting, headache, dizziness rash, flatulence, heartburn, anemia, hypokalemia, cardio vascular risks, peptic ulcer; GI bleeding, not recommended for use with moderate to severe renal impairment
Naproxen sodium	Analgesia: 30-60 Anti-inflammatory: within 2 weeks	Analgesia: unknown  Anti-inflammatory: 2- 4 weeks with routine administration	Analgesia: Up to 7 Please consider up to 12	Oral	Headache, dizziness, rash, edema, alterations in blood pressure, abdominal pain, cardio vascular risks, peptic ulcer, GI bleeding, not recommended for use with moderate to severe renal impairment
		Opioi	id Analgesics		
Codeine	15-30	0.5-1	4-6	Oral	Sedation, nausea/vomiting, constipation, respiratory depression, delirium, pruritis
Fentanyl	Unknown	20-72 It may take up to 6 days for fentanyl levels to reach equilibrium on a new dose	72	Trans- dermal Patch	Monitor patients closely for respiratory depression, especially within the first 24-72 hrs of initiating therapy. Rotate transdermal patch to different skin sites after removal of the previous patch. Do not apply to those with elevated body temperature such as heating pads, hot baths, or fever
Hydrocodone (combinations)	10-30	0.5-1	4-6	Oral	Sedation, nausea/vomiting, constipation, respiratory depression, delirium, pruritis
Hydromorphone	30	0.5-1	3-4	Oral	Sedation, nausea/vomiting, constipation, respiratory depression, delirium, pruritis

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Medication	Onset of Action (minutes)*	Peak Effect (hours)*	Duration of Action (hours)*	Route of Admin.	Comments
Methadone	30-60	1-2	4-6 Full analgesic effects, are not attained until 3 to 5 days after initiation of dosing. Drug is known to eliminate slowly causing high risk of overdose	Oral	Sedation, nausea/vomiting, constipation, respiratory depression, delirium, pruritis, life-Threatening QT Prolongation, monitor patients closely for respiratory depression, especially within the first 24 to 72 hours, narrow therapeutic index (dose carefully)
Morphine, immediate release	15-60	1	3-6	Oral	Sedation, nausea/vomiting, constipation, respiratory depression, delirium, pruritis
Oxycodone, immediate release	15	1-2	3-4	Oral	Sedation, nausea/vomiting, constipation, respiratory depression, delirium, pruritis
Oxymorphone	5-15	0.5-1	3-6	Oral	Sedation, nausea/vomiting, constipation, respiratory depression, delirium, pruritis,
Tramadol, immediate release	60	2-3	6	Oral	Dizziness, constipation, vertigo, nausea, headache, somnolence, agitation, anxiety, emotional lability
	<del>_</del>	M	luscle relaxants		
Baclofen	3-4 days	5-10 days	4-6	Oral	Drowsiness, dizziness, nausea, confusion, headache, constipation, urinary frequency
Tizanidine	Unknown	1-2	3-6	Oral	Dry mouth, somnolence, dizziness, asthenia, constipation, blurred vision

<sup>\*</sup>Unless otherwise specified

Quick onset of action times found within this table may account for the drug's absorption in the oral liquid form. Onset of action can also differ due to the manufacturer's variability with tablet compression effecting disintegration and dissolution times when ingested.

## ONSET, PEAK AND DURATION OF COMMON PAIN MEDICATIONS

Not a complete list of analgesic medications/categories

References: Clinical Pharmacology <u>www.clinicalpharmacology.com</u> Drugs.com <u>http://www.drugs.com/professionals.html</u>