



Embargoed: 09:00 BST, 13th September, 2006

“Consistent benefits of SR hydromorphone (*SR Palladon*®) in the early treatment of severe chronic pain”

13th September, Istanbul, Turkey: Research into the efficacy and safety of sustained release hydromorphone (*SR Palladon*®) has demonstrated a reduction in verbal pain scores by an average of nearly 70% just 3 weeks after switching from alternative medications. With an ever increasing number of options available, the study¹ was designed to help establish whether SR hydromorphone represents an appropriate ‘first choice’ among the stage III opioids.

Dr H.-B. Sittig from Medizinisches Versorgungszentrum (Medical Care Center) Buntenskamp in Hamburg-Geesthacht, Germany explained further: “The rungs of the WHO prescribing ladder are getting increasingly close together as the frequency of conditions associated with severe pain, polypathia* and polypharmacy are also increasing.

“The stronger, Stage III, opioids are rightly being used much earlier in the progression of painful diseases and as such it is essential that we investigate which of these drugs demonstrates the best results at the earliest stage.”

A total of 670 patients with severe pain were recruited onto the trial and described an average verbal pain score of 7.1 ± 1.4 (VRS 0-10; none-most severe pain). None of the patients had progressed further than the second stage of the WHO ladder and they were all switched to sustained-release hydromorphone. After three weeks of treatment the pain scores decreased to 2.5 ± 1.6 , an average reduction of 64.8%. Quality of life scores also increased with an average improvement of 54.7 % across 7 measured parameters.

A series of additional trials from around the world and presented at EFIC all demonstrate consistent results concerning the benefits of sustained release hydromorphone in the treatment of patients with severe, chronic pain. Work by **Dr H.-U. Giesen from Malteser Hospital, St.Hildegardis, in Cologne, Germany**, similarly recorded a reduction in average pain scores of 58.8% among elderly patients suffering with cancer or musculoskeletal conditions².

Dr Lossignol from the Jules Bordet Institute in Brussels specifically assessed the benefits of SR hydromorphone as compared to a selection of other stage III opioids: morphine, fentanyl and methadone. A total of 19 patients were selected for the trial³ and switched from whichever stage III opioid they were previously taking, to SR hydromorphone. After one week 56% of the patients described their new treatment as “better” or “much better” than their previous one and after three weeks that figure had risen to 69%.

Conclusions from each of these trials agree that SR hydromorphone demonstrates a high level of efficacy for the treatment of patients with severe and chronic pain. **Dr Sittig** in particular argues that SR hydromorphone demonstrates many of the characteristics required of the ideal ‘first line’ treatment at stage III in the WHO prescribing ladder for pain management.

-ENDS-

For further information, or to request an interview with a member of the study team, please do not hesitate to contact:

Aoife Gallagher / Emily Bunting (‘paineurope’ newswire team)
Tel: +44 (0) 20 7331 5371
Fax: +44 (0) 20 7331 9084
Email: Aoife_Gallagher@uk.cohnwolfe.com

Note to editors

- **Palladon®** is not licensed for use in Turkey
- Please note that indications for SR hydromorphone will differ across Europe

References

1. Abstract presentation at the European Federation of IASP Chapters (EFIC) 2006. *Benefit of a pain therapy with sustained release hydromorphone as first step III opioid*. H.-B. Sittig, Medizinisches Versorgungszentrum (Medical Care Center) Buntenscamp Hamburg-Geesthacht, Germany
2. Abstract presentation at the European Federation of IASP Chapters (EFIC) 2006. *Reliable relief of strong pain through individual dose-titration*. H.-U. Giesen, Malteser Hospital, St.Hildegardis, Cologne, Germany
3. Abstract presentation at the European Federation of IASP Chapters (EFIC) 2006. *Opioid rotation to palladone sr (hydromorphone slow release) for the treatment of severe cancer pain*. D. Lossignol, Jules Bordet Institute, Brussels, Belgium; B. Coster, Hospital Saint Joseph IMTR, Loderval, Belgium; Y. J. B van Megen, Mundipharma Comm V. A., Belgium

*Polypathia is a multiplicity of diseases or disorders