OPIUM AND BELLADONNA SUPPOSITORIES

Currently there is only one supplier for this product:1,2

<table>
<thead>
<tr>
<th>DIN</th>
<th>Company</th>
<th>Brand Name</th>
<th>Schedule</th>
<th>Ingredients</th>
<th>Strength</th>
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</tr>
</thead>
<tbody>
<tr>
<td>01901869</td>
<td>SANDOZ CANADA INCORPORATED</td>
<td>SANDOZ OPIUM &amp; BELLADONNA</td>
<td>Narcotic</td>
<td>BELLADONNA OPIUM</td>
<td>15 MG</td>
<td>RECTAL SUPPOSITORY</td>
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<td>65 mg</td>
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**Indication:** relief of moderate to severe pain associated with ureteral spasm not responsive to non-narcotic analgesics and to space intervals between injections of opiates.3

**Therapeutic alternatives for opium & belladonna suppositories:**

**Antispasmodic:**

- Hyoscine butylbromide 20 mg/ml injections (Buscopan)4: 10 mg to 20 mg IM, SC, or IV (at an injection rate of 1 mL/min).5
- Atropine is an alkaloid constituent of belladonna (along with scopolamine and hyoscyamine)8 and has been used for ureteric colic at a dose of 0.4 mg orally every 4 to 6 hours as needed.3 Atropine ophthalmic drops are available as 1% solution.6

**Opioid Analgesics:**

- Morphine sulfate suppository:4 5 or 10 mg (opium to morphine equivalent ~ 10: 1)7
- Morphine sulfate injection: 5 mg loading dose and up to two additional 2.5 mg doses if necessary.7
- Alternate opioids

**Non-opioid Analgesics:**

- **NSAIDS are drugs of choice for renal colic.**8 In addition to analgesia, NSAIDS may also help to decrease ureter spasms. Caution if renal impairment.7
  - Rectal suppositories: diclofenac 50 or 100 mg, indomethacin 100 mg, naproxen 500 mg
  - Ketorolac IM or IV 15 to 60 mg
- Combination of NSAID with opioid may provide greater pain relief than either agent alone.7
- Combination of NSAID with antispasmodic does not increase pain relief.8

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medSask, August 2015
References: