**Criteria**

Patients order and use analgesics differently and some may need a more individualised approach, e.g. if using infrequently or at low dose could send an information letter rather than a directive letter advising that their medication will be reduced each month.

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| **Inclusions** | **Exclusions** |
| On repeat for > 3 months | On palliative care register |
| Drug addiction diagnosis |
| IV opioids |
| Weaker opioids  Start with Codeine | Cancer diagnosis |
| Infrequent orders - review separately/info letter |
| Those on combination of opioids - to rationalise and review |
| Not had a pain review in last 12 months | H/o anxiety/depression - check with GP if suitable or needs separate review  Note NICE NG 193 recommends antidepressants as an option for chronic pain |
| GPs to exclude any other unsuitable patients, e.g. awaiting surgery |

**Prioritise high risk groups** – e.g., over 65s, high risk combinations including opioid, gabapentinoids, antidepressant, benzodiazepine.