

Summary of Findings – Opioidrotatie

PICO 1. Efficacy of opioid switch

Outcome	Study results and measurements	Absolute effect estimates		Certainty of the Evidence (Quality of evidence)	Conclusions
		Before switch	After switch		
Pain intensity (critical)	Based on data from 1 study (Corli, 2019)	Average pain intensity (API) was measured using the numeric rating scale (NRS, 0-10). The API decreased on average by 31.2%. The worst pain intensity (WPI) had a 13.3% decrease. Pain reduction was adequate (defined as decrease >30% of API) after 51.45% of switches.		Very low Due to serious risk of bias, due to serious indirectness, due to serious imprecision ⁶	The evidence is very uncertain regarding the effect of opioid switching when compared with no opioid rotation or opioid switching in patients with pain due to cancer (treatment).
Adverse effects (AE)	Based on data from 1 study (Corli, 2019)	AE were measured by the number of points of the Therapy Impact Questionnaire. The control of opioid side effects was adequate (AE disappeared or decreased ≥2 points) after switching in 43.5% of patients. The relief of AE varied among AE and within each patient.		Very low Due to serious risk of bias, due to serious indirectness, due to serious imprecision ⁷	The evidence is very uncertain regarding the effect after opioid switch when compared with before in patients with pain due to cancer (treatment).
Quality of life	-	-		No GRADE (No evidence was found)	No evidence was found regarding the effect after opioid switch when compared with before in patients with pain due to cancer (treatment).
Patient satisfaction	-	-		No GRADE (no evidence was found)	No evidence was found regarding the effect after opioid switch when compared with before in patients with pain due to cancer (treatment).

1. Risk of Bias: serious. Inadequate/lack of blinding of participants and personnel, resulting in potential for performance bias, Inadequate sequence generation/ generation of comparable groups, resulting in potential for selection bias; Indirectness: serious. Due to the design of the study, the study made an indirect comparison of the intervention and control group. Imprecision: serious. Low number of patients.

2. Risk of Bias: serious. Inadequate/lack of blinding of participants and personnel, resulting in potential for performance bias, Inadequate sequence generation/ generation of comparable groups, resulting in potential for selection bias Indirectness: serious. Due to the design of the study, the study made an indirect comparison of the intervention and control group. Imprecision: serious. Low number of patients.

PICO 2: Efficacy of Methadone Rotation and Comparison Between Different Methods of Rotation to Methadone

Since none of the studies met the inclusion criteria, no quality of evidence (GRADE) and conclusions based on literature could be drawn.

Outcome	Study results and measurements	Absolute effect estimates	Certainty of the Evidence (Quality of evidence)	Conclusions
All outcomes	-	-	<p style="text-align: center;">No GRADE (no evidence was found)</p>	<p>No evidence was found regarding the effect of opioid rotation or opioid switching when compared with no opioid rotation or opioid switch in patients with pain due to cancer (treatment).</p>