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Educational questions.

“Opioids for chronic refractory breathlessness: patient predictors of beneficial response”

1. With chronic refractory breathlessness, which of the following statements is CORRECT?

- An improvement of 10 mm (0–100 mm visual analogue scale) in intensity is a clinically useful therapeutic target.
- The breathlessness can be improved by treating the causative condition.
- A reduction in breathlessness intensity should be the primary aim of management.

2. Opioid therapy for chronic refractory breathlessness: which of the following statements is CORRECT?

- Elderly people over the age of 85 are very unlikely to benefit.
- People with underlying heart disease are more likely to benefit.
- People who spend more than 50% of the day in bed or chair are unlikely to benefit.
- Younger age is an independent predictor of those likely to benefit.

3. Which of the following rationales is INCORRECT? Higher baseline intensity of breathlessness predicted a beneficial response to opioids because:

- Breathlessness is worse in those with more advanced disease.
- Extreme variables are likely to become closer to the average when repeated.
- Those with less intense symptoms have less scope for improvement.

4. Clinical recommendations: which of the following statements is CORRECT?

- Eight patients need to be treated with opioids for their breathlessness for five to gain benefit.
- A therapeutic opioid trial is NOT recommended for the very elderly.
- Opioid related side-effects are of little concern at the doses required to treat breathlessness.
- Patients were 4.6-times more likely to receive harm than benefit from opioids.