**What was done**

To simplify the process of opioid rotation in pediatrics, an opioid conversion chart with easily memorable conversion factors was generated.

**Why it was done**

In some patients, it is necessary to change the opioid during therapy, due to tolerance development or due to side effects. Although conversion tables for adults are well established, they are not readily available for pediatric use.

**How it was done**

1. A literature search was performed to collect conversion factors and equivalent doses of opioids with different application routes. We searched specifically for conversion factors in pediatrics. [a-n]

2. For all conversion factors experts confirmed their adequacy for clinical use in pediatrics.

3. The conversion factors were rounded up to whole numbers, which was considered reasonably based on long-term experience in pediatric pain management.

**Why older than 1 year**

- Immature metabolism in children under 1 year makes the opioid action often unpredictable. Therefore specialists in pain management should be consulted.
- The use of the chart is for children older than 1 year.

**What is next**

- Analysis of a possible reduction in critical incidences due to mistakes in calculation
- Survey with (junior) doctors on the use of the table and its benefits and possible ways to improve it for daily use.

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**Table: Opioid Rotation in Pediatrics**

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</thead>
<tbody>
<tr>
<td>mg/die</td>
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<tr>
<td>Sufentanil+++ i.v.</td>
<td>0.1 mg/kg alle 4-12 h</td>
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<tr>
<td>Methylprednisolon</td>
<td>0.02 mg/kg/h</td>
<td>0.02 mg/kg/h</td>
<td>0.02 mg/kg/h</td>
<td>0.02 mg/kg/h</td>
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<tr>
<td>Methadon i.v. (Racemat)</td>
<td>0.01 mg/kg alle 4-12 h</td>
<td>0.01 mg/kg alle 4-12 h</td>
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</tr>
</tbody>
</table>

**How the chart works**

1. Calculate the daily dose of the current opioid [mg/day]
2. Look for the starting substance in the left column
3. Look for the target substance
4. Take the factor below the target substance
5. Multiply/divide the daily dose with the corresponding factor
6. Divide the daily dose into suitable dosing intervals and single doses
7. Further procedure according to internal guidelines

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