

Myoclonus

Myo = muscle Clonus = jerks

Myoclonus is a neuro-excitatory effect commonly seen among patients on opioid medications including morphine, hydromorphone, fentanyl, meperidine, and sufentanil. Myoclonus can occur with all routes of administration.

Characteristics:

Uncontrollable twitching and jerking of muscles or muscle groups, usually occurring in the extremities, starting with only an occasional random jerking movement. Family may be the first to notice this symptom.

Myoclonus is *not* a seizure.

Physical Examination: *(to be completed by clinician after identifying a patient with possible opioid toxicity)*

- a) **Assess frequency** of myoclonic jerks in a 30-60 second time period.
- b) **Review the medication profile** to identify increases and efficacy of opioid regimen.
- c) Determine: **Is there evidence of a new or worsening delirium?** Complete a bedside mini-mental assessment.
- d) **Assess hydration** status.
- e) **Estimate prognosis:** Hours/days/weeks/months/years? A longer prognosis demands a more definitive change in treatment.

A consultation with a physician is required. Based on presenting symptoms and the degree of myoclonus, interventions may include opioid rotation, hydration, or adding a medication to control the symptoms.