

References

If you require a full list of references for this leaflet please email patient.information@ulh.nhs.uk

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille, please email the Patient Information team at patient.information@ulh.nhs.uk

Pain relief after your operation

Department of Pain Management
Grantham & District Hospital 01476 565232
Lincoln County Hospital 01522 573717/573691
Pilgrim Hospital 01205 446612

www.ulh.nhs.uk

Introduction

The aim of this booklet is to provide you with information about pain control after your operation. Reading it should help you to:

- Understand why you feel pain and how painkillers work.
- Learn why controlling your pain is important for your recovery as well as your comfort.
- Know how to help nurses assess your pain.
- Be able to play an active part in your recovery.
- Provide information of the options to treat your pain.

Why do we feel pain?

During any operation nerve endings are stimulated. When this occurs pain messages are sent. Pain messages are transmitted along your spinal cord to your brain. Although everybody's experience of pain is different, everyone experiences pain as an uncomfortable and unpleasant feeling.

How do painkillers work?

Painkillers work in different ways:

- Some will reduce the swelling of injured tissue
- Some work on the chemicals produced by your body
- Some work by blocking pain messages from getting to your brain

You may be given a combination of different painkillers that work in the different ways to control your pain.

Further sources of information

Useful web site:

Royal College of Anaesthetists
www.youranaesthetic.info

The pain management teams would like to thank University Hospitals of Leicester and Nottingham for providing patient information to use as reference material.

Contact details

Your Pain Management contact details are:

Grantham & District Hospital
Please contact the ward for advice, who may discuss your case with the pain practitioners.

Lincoln County Hospital
01522 573717

Pilgrim Hospital
01205 446612

Can be contacted:
Monday to Friday 9.00am to 5.00pm

For out of hours or if no one is available, please leave your message on the answer machine at the relevant hospital.

Why is it important to control my pain?

Most people expect some degree of pain after an operation. We are unable to promise that you will not have some pain, but we will aim to keep your pain to a minimum. This is important for your comfort and for a safe, speedy recovery.

As soon as your pain is under control you will be able to move around and perform deep breathing exercises. This reduces the risk of getting complications such as:

- Bed sores
- Stiff muscles and joints
- Chest infections
- Blood clots in your legs

It is fairly common for patients to be reluctant to take regular painkillers. Sometimes they wait until the pain is really bad before complaining.

We want to encourage you to take painkillers regularly, because this is the way they work best. **Please do not try to be brave.** If you wait until your pain is very bad, then it will be more difficult to control. This will result in you experiencing unnecessary distress and discomfort.

You should aim to control your pain so that you can cough, breathe deeply and move about in comfort.

How can painkillers be given?

There are several different ways they can be given such as:

1 Directly into your vein

A small dose of painkiller may be given to you via the drip in your hand or arm. This is given to you by a nurse/doctor in the recovery room when you awake from your anaesthetic. Once given, it usually works very quickly - within 10 to 20 minutes. This will ensure that your pain is manageable before you leave the recovery room for the ward.

2 Under the skin

You may be given your painkiller through a small plastic tube, which is placed in the fatty tissue, just under your skin. It stays in place with a clear dressing and the medication is administered through an attached plastic tube. It is more comfortable than an injection and works slightly quicker. This method is used instead of an injection to relieve pain.

3 Patient Controlled Analgesia (PCA)

Patient Controlled Analgesia means you control the amount of painkiller you need. A strong painkiller, usually morphine, is put into a special pump and attached to your drip.

You have a button to press, so that when you feel pain or discomfort, you can tell the machine to give you a small dose of the painkiller. You will need to press the button when you feel the pain starting, do not wait until the pain is severe, as it will then take a long time to get on top of your pain.

The machine is programmed for safety, so that you can not accidentally give yourself too much. **Please do not allow visitors to press the button on the handset. It is solely for your use.**

- Let the staff know if you have pain or feel uncomfortable; even if the nurses appear busy they will be happy to get you some medicine.
- Please do not suffer in silence - there are many modern medicines and treatments available to help relieve pain, we want to encourage you to use them.

Pain relief at home

- you will be prescribed pain relief (analgesia) to take home
- the ward nurse will explain how and when to take them
- only take the prescribed dose
- if the pain persists you should contact your GP for advice; your GP will help to monitor how long you will need to take them after surgery

Avoid over the counter remedies without speaking to the Pharmacist or your GP about the medicines you are already taking.

Constipation is a common side effect of many painkillers that are given to patients. Consult your Pharmacist/GP if this becomes a problem and they will be able to suggest a simple remedy.

How can I be involved in deciding which painkiller is best for me?

After your operation, it will be the Anaesthetist who prescribes your painkillers. He/she will usually see you before your operation - this is a good time to talk about your painkillers.

Your doctor and the nurses on the ward will also be happy to talk to you about your painkillers.

You can also talk to a nurse from the Hospital Pain team.

Getting the best from your painkiller

Quite often we need to control pain with a combination of painkillers. You might find your nurse gives you two or even three different types. This is safe and will have a much better effect than using only one type of painkiller.

Some people worry about taking strong painkillers, as they believe that they will become addicted. This is highly unlikely. You are more likely to get a problem by not taking your painkillers.

Some useful tips

- Take your painkillers regularly - do not refuse doses unless you can move and cough comfortably.
- Ensure you have painkillers before activities such as physiotherapy, walking and washing - this will help you to do these things more comfortably.
- Do not let your pain get too bad - you should ask the nurse for painkillers when you need them - you do not need to wait for a medicine round.

You should be told about how the PCA works before your operation. When you wake up from your operation the PCA will be there ready for you to use, the Recovery Nurse will remind you how to use it.

Advantages

This method is very popular with patients as it allows individual pain control. Because the drug goes directly into the vein it works very quickly and you do not have to wait for a nurse to prepare an injection. You are the only one who knows how bad your pain is, so this device allows you to manage your pain as required.

You may use PCA as long as you need it but most patients progress to tablets after a few days.

Other facts you may wish to know

You should not feel any sensation when pressing the button. If you do feel any discomfort in your arm, please let the nurse know.

You may feel drowsy whilst receiving strong painkillers. The nurses will keep a regular check on this.

Some people feel sick while using a PCA. You will always be prescribed medication in case this happens, so please let the nurse know if you feel sick.

4 Tablets and Medicines

As soon as you are able to drink (usually about half a glass of water), you will be able to take painkilling tablets by mouth. This may be in addition to other methods or instead of them.

Tablets and medicines come in different strengths and are simple to take. They can work just as well as any of the other methods mentioned.

Tablets and medicines taken by mouth will take 30 to 40 minutes to start working.

5 Suppositories

Paracetamol and anti-inflammatory drugs are very effective after operations and work with other drugs to give you better pain control. Whilst you are not able to eat or drink, these medicines can be given to you as a suppository into your back passage. They will not make you need the toilet but will dissolve and be absorbed through the wall of the lower bowel. Suppositories are not suitable for all patients, particularly those who have had certain types of surgery.

How can I help the nurse assess my pain?

The nurse will ask you to describe your pain as none, mild, moderate or severe, whilst lying still and on movement (like coughing). They can then make a score and use it to assess how well your painkillers are working or whether to make any changes.

We aim to keep your pain at none to mild and we need to know if it rises above this, as this may become troublesome.

When your pain is well controlled you will not only be able to move more, you will also be able to relax and sleep.

Sickness after surgery

Some people worry about feeling sick after an operation. Here are some of the most frequent questions answered:

Is everyone sick after an operation?

No, roughly one third of people feel sick, while two thirds usually do not.

Are some people more likely to be sick than others?

Some people can be more sensitive to treatments than others. Length and type of operation and medication used can have an effect.

Can sickness be prevented?

Yes most of the time, there are drugs that can be given at the time of your anaesthetic. It is important to tell the nurse/doctor of any worries you have.

If I am sick, can anything be done?

Yes, the nurse can give you medication that will help, either directly into your vein, or as an injection.

How long does the feeling of sickness last?

Every one is different. Usually sickness soon passes off, especially once some treatment has been given.

Six top tips for coping with sickness

- Warn us if you felt sick after a previous operation
- Tell the nurse straightaway if you feel sick
- Move slowly and smoothly
- Drink small sips of water to begin with
- Eat little, light and often when you start eating again
- Try taking deep breaths if you feel sick

Most of the time, there are drugs that can be given at the time of your anaesthetic. It is important to tell the nurse/doctor of any worries you have.