

Pain Relief

The aims of adequate pain relief are to, allow you to recover from your surgery; allow you to sleep well at night and allow you to perform your daily activities and post-operative exercises.

Pain relief medications are not designed to totally block the pain in your operated area, rather they are used to make the pain tolerable in order for you to perform activities and exercises. Pain relief medication is more effective when taken in a pre-emptive manner, rather than letting the pain become so unbearable you cannot cope. If you let the pain become too severe before taking any relief medication, it will take several hours before the pain is under control again.

Other Techniques for Controlling Pain

Anything that distracts from the pain is useful in combination with your pain relief medication. Watching television, listening to radio or reading are common techniques. Ice packs can be used on the operative area to aid in pain relief and reduce swelling. Heat packs can be used to alleviate muscle cramps and spasms.

Tolerance and Addiction

Some patients worry about becoming addicted to the medication. The short amount of time you will spend taking the pain relief is not enough to cause an addiction, however your body will learn to tolerate it. Therefore gradual reduction of the medication over time will aid in a better transition to being free of pain medication

1. Paracetamol 500mg (Panadol)

Panadol is least likely to cause side effects. Panadol by itself is not a strong painkiller particularly for surgical pain but will reduce the amount of narcotic required and therefore the likelihood of side effects. Panadol should be taken four times a day; breakfast, lunch, dinner and before you go to bed. Panadol should be the last medication to cease following your surgery. Maximum 8 tablets/day. You may have been given Panadiene Forte as well. These will replace Endone as you reduce the dosage. **Panadol, Panadiene Forte and Panadiene all contain Paracetamol. You must not take more than 4G (8 tablets) of Paracetamol in one day**

2. Tapentadol/Palexia

Tapentadol is a relative newcomer to the analgesia market. It acts like Oxycodone, however, has a reduced incidence of side effects, like nausea, vomiting and constipation. You should not take this medication if you are on MAOI antidepressants. Palexia will come as a slow release (SR) in 100mg and an immediate release (IR) 50mg. You can take the SR (100mg) twice daily or just at night, and the IR (50mg) 1-2 tablet every 4 (four) hours or as required (breakthrough pain). You may also have only been prescribed the IR version if you have not had joint replacement surgery. You will need to wean off this medication rather than go "cold turkey" to avoid any issues, like headaches, shakes and sweats.

3. Oxycodone Endone /Targin

Endone is the short acting narcotic pain relief medication, whereas, Targin 10/5mg is a slow release (SR) version. You can take the Endone 5mg, 1-2 tablets every 6 (six) hours or as required (for breakthrough pain). The Targin can be taken twice daily or just at night as the pain starts to settle. You may also have only been prescribed the Endone if you have not had joint replacement surgery. You will need to wean of this medication rather than go "cold turkey" to avoid any issues, like headaches, shakes and sweats.

4. Anti-inflammatories (Meloxicam, Celecoxib, Ibuprofen)

You may or may not have been prescribed anti-inflammatories. If you have not been instructed to take anti-inflammatories you must check prior to taking them. They can affect some aspects of the healing process. Prescribed anti-inflammatory medications must be taken on a full stomach and you must ensure an adequate fluid intake to ensure a good urine output. Any heartburn or indigestion type symptoms are likely to be caused by the anti-inflammatories. Discontinue this medication and contact the rooms for further advice.

Note – Tapentadol and Oxycodone are very strong narcotics and should be kept out of reach of children and taken to a pharmacist for disposal.

Side Effects

All medications can cause side effects. Always refer to the patient information pamphlet that is provided with your medication for these common side effects. You will be able to recognise the most common side effects quickly after taking the medication. If you do experience any side effects, please contact the rooms for advice and a possible alternative.

Narcotic painkilling medications **can cause nausea, vomiting and constipation**. The combination of reduced activity and oral painkillers can lead to some form of constipation. A laxative should be used from the commencement of the pain relief protocol in order to help prevent this from occurring. Constipation is best prevented rather than cured.

Nausea and vomiting are common side effects of narcotic medications, and 30% of people experience a real problem. As your age increases, so does the sensitivity to the oral narcotic medications. If you experience nausea and/or vomiting you must cease the narcotic medication. Most of the oral narcotic painkilling medications can take up to 3-4 days to be excreted from your body, so it can take a while for nausea to settle once it has developed. Utilise the ice packs and regular panadol, increase your fluid intake, and start with a light bland diet until you feel better. Some patients may need to cease narcotic medications completely.

Remember!

1. Control your pain early by taking your pain medication in a pre-emptive manner.
2. Nausea and vomiting are common side effects and you may need to either reduce or cease the narcotics you are taking to alleviate the symptoms.
3. Constipation will occur with regular use of narcotic medication. Ensure you mobilise often, drink plenty of fluids and take a laxative to prevent this condition.
4. Utilise Panadol for regular background pain relief. If you have been prescribed Panadiene or Panadiene forte, ensure that you do not take more than 8 tablets/day in combination. All of these products contain Paracetamol, which can cause liver failure if you take more than the recommended dose.
5. Not everyone's pain experience is the same. Do not compare your own experience to another person, as they will be different.
6. If unsure how to use your medications after reading this pamphlet contact Dr. Kaushik Hazratwala's rooms.

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Your Guide to Pain Relief

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