



**THE BRITISH
PAIN SOCIETY**

EXPERTISE WHERE IT MATTERS



**UNDERSTANDING
AND MANAGING PAIN
AFTER SURGERY**

**INFORMATION FOR ADULT
PATIENTS AND THEIR CARERS**

A shortened 'taster' of the full booklet and ordering information

TASTER VERSION

**UNDERSTANDING
AND MANAGING PAIN
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CONTENTS

Why is it important to treat pain after surgery?

What can you do to help manage your pain?

Relaxation

Keeping active

Physiotherapy

Heat and cold

Mood

Sleeping

Reduce swelling

Using pain-relieving medicines

Which pain-relieving medicines should you use?

When and how can you reduce your pain-relieving medicines?

When should you contact your GP?

Final messages

Further information that may be helpful

Things to remember while you are in hospital

Before you leave hospital

How long should my pain last?

Useful websites

Patients' stories

Pain medication chart

Pricing and ordering information



WHY IS IT IMPORTANT TO TREAT PAIN AFTER SURGERY?

Pain after surgery is known as acute pain; it has a known cause and will usually improve as the tissues heal. Pain after surgery is normal.

Acute pain sometimes:

- Makes you feel like staying still, but this can lead to complications such as stiff joints and muscles, constipation, and blood clots in your legs (Deep Vein Thrombosis)
- Stops you breathing deeply, which may lead to a chest infection (pneumonia)
- Stops you sleeping well
- Makes you feel anxious about why it hurts
- Makes you feel miserable

Sometimes acute pain continues and becomes longer term and persistent (chronic pain).

PAIN AFTER SURGERY IS NORMAL



WHAT CAN YOU DO TO HELP MANAGE YOUR PAIN?

As well as taking pain-relieving medicines there are many things that you can do to help manage your pain.



KEEPING ACTIVE

After surgery it is important to keep active. You should also have been given advice about any activities to avoid and those that you need to take extra care with.

Gentle movement, including moving the area that hurts, can help promote healing and reduce pain. It's easy to sit still for long times, so setting a timer to remind you to move regularly can help.

It can be hard to start exercising, especially if you were unwell or inactive before your surgery. So start slowly and build up gently. If you usually do sports, ask your surgical team when you can safely return to them.



MOOD

It's common to feel low or vulnerable after an operation. These feelings should pass as your body heals. Try and focus on what you can do and not what you can't do. Avoid getting overtired. Aim to notice the small things that give you pleasure each day. If your mood does not pick up as your body heals, you could talk to your family, a friend or your GP.



USING PAIN-RELIEVING MEDICINE

The purpose of your pain-relieving medicines is to reduce your pain to a level where you can do your normal activities while your body heals.



WHICH PAIN-RELIEVING MEDICINES SHOULD YOU USE?

Different pain medicines can be used depending how much pain you are feeling. In hospital your doctor or nurse may have used a pain chart like the one below to help understand them chose which pain-relieving medicines to offer you. You might find it helpful to use it when taking your medicines at home.

PAIN CHART			
No pain	Mild pain	Moderate pain	Severe pain
"Comfortable"	"A bit of a niggle or ache. "Feels uncomfortable"	"Really quite sore, not sure I want to move about much"	"Worst pain I've had" "Stops me coughing & moving completely"

The next chart tells you a little more about the most commonly available pain-relieving medicines, when they are indicated and how to use them. ...

Some people with cognitive difficulties (e.g. dementia) who have had surgery may find it difficult to use a chart like this. They will need pain relief in the same way as other people but their carers may need to look for changes in behaviour that indicate pain. Consider using regular pain medication and ...



WHEN AND HOW CAN YOU REDUCE YOUR PAIN-RELIEVING MEDICINE?

Once your body is healing and you feel more like your normal self, you can reduce the dose and how often you take these medicines.

You should keep taking paracetamol regularly while you gradually reduce and stop the other medicines. The stronger ones (opioid medicines) should be stopped first. Some, like morphine and oxycodone, need to be reduced gradually. Others, like co-codamol, can be stopped immediately. Then stop the NSAID (if you are taking one).

About three to five days after leaving hospital reduce, or stop, the strongest pain-relieving medicine you are taking.

If your pain becomes unmanageable, restart the medicine and try stopping again a few days later. Continue to reduce your pain-relieving medicines, opioids (e.g. morphine/codeine) first, then NSAIDs and finally paracetamol.

If you need more pain-relieving medicines you can buy paracetamol and ibuprofen (NSAID) from any pharmacist. If you need more of the stronger medicine you will need to contact your GP. The hospital should have sent a letter to your GP containing details of the operation you had and the medicines you have been advised to take. Your GP may need to see or speak to you if you have requested more of the opioid medicine.



FINAL MESSAGES

- Pain is a normal experience after surgery.
- There are many ways to control pain.
- Having your pain controlled is not the same as being pain free.
- It is important to actively help your body to recover from surgery by following the instructions in this leaflet and those you have been given by the hospital.
- Be kind to yourself: healing and recovery take time and require energy.

If you need more information don't be afraid to ask.



PATIENT'S STORIES

PAIN AFTER WRIST SURGERY

My hand and wrist did feel sore for a few days after the operation, but the pain soon turned into a stinging feeling, and after about a week it had passed. I was given some exercises to do and was soon wriggling my fingers again.

YOU MAY NOT BE ABLE TO BE PAIN FREE ALL THE TIME. MANAGING YOUR PAIN IS IMPORTANT TO HELP YOU DO DAY TO DAY THINGS.

PAIN AFTER SURGERY FOR TRAUMA

I had a horrible accident when a car knocked me off my bicycle. I broke my leg and fractured some ribs. I had two operations and still needed lots of pain relieving medication when I was sent home. I went home with paracetamol, ibuprofen and oxycodone. I needed to take all the medications for several weeks; then I started feeling a bit better so I stopped the oxycodone. This made me feel dreadful so I went to see my GP for advice. My GP thought that because I had been taking the oxycodone for a while my body had become used to me taking it...

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