

## Frequently Asked Questions

### 1) What if I already take painkillers?

If you are taking painkillers on a regular basis, you must let your doctors know. This will ensure that you get the treatment that is best suited to you. Please take them on the morning of surgery unless directed otherwise.

### 2) Who will be checking on me?

You will be checked every few minutes to every few hours depending on your condition. If you have had surgery and are using special painkilling methods, nurses and doctors from the Pain Team will be visiting you every day.

### 3) Will this ensure that all my pain will be gone?

Although we would like to take away all the pain and discomfort you are feeling, it may not be possible to

remove it completely. Our aim is to make you as comfortable as possible, especially when performing your daily activities.

### 4) Are painkillers bad for you or addictive?

No. Painkillers when used to ease short-term pain are not addictive. However, all medications may produce side effects. Please tell the staff if you feel sick or very sleepy. Long-term use of strong painkillers (e.g. oxycodone) can result in tolerance to their painkilling effects. If you feel your pain is ongoing, you need to see your local doctor for review.

### More Information

For more information, ask for a copy of *About Your Anaesthetic* leaflet or please refer to [www.anzca.edu.au/patients](http://www.anzca.edu.au/patients)



# Managing Your Pain

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Pain can occur after surgery. Pain that is untreated can make it difficult to deep breathe, cough, get out of bed and perform your normal daily activities. Everyone feels pain differently. It is important for your comfort and recovery that you tell us about your pain. We can then work out the best form of pain relief.

After your operation, you will be asked questions about any pain you may feel to help us treat you better.

1) Where is your pain?

2) What does the pain feel like?  
Some words used to describe pain are: sharp, stinging, cramping, burning and aching.

3) How much does it hurt? We will ask you to rate your pain from 0 to 10, with 0 being “no pain”, and 10 being “worst pain ever”. You may score your pain differently when you are resting and when you move around.

Ask for pain relief before you get too uncomfortable. It is harder to ease pain once it has taken hold. Please tell your nurse or doctor about any pain that doesn't get better.

## How pain relief can be given

Every patient has their own pain management plan. The plan depends on your health, the procedure you have had, your past experiences, and whether you are going home on the day of surgery.

Your doctor will recommend the best pain treatment for you and may use one or more of the following:

### Tablets

- Paracetamol (Panadol, Panamax)  
Good for mild pain and works well with other painkillers
- Anti-inflammatories (Ibuprofen, Diclofenac, Naproxen, Meloxicam, Celecoxib)
- Tramadol (Tramal, Zydol, Durotram XR)
- Oxycodone (Endone, Oxynorm) or Oxycodone Slow Release (Oxycontin SR, Targin)
- Other pain medicines (Gabapentin/ Neurontin or Pregabalin/Lyrica, Amitriptyline)

**Injections** - May be given into a vein (intravenous), into a muscle (intramuscular) or under the skin (subcutaneously).

**Continuous drip (IV) containing pain medicine** - Patient Controlled Analgesia (PCA): This is where you are in control of giving yourself painkilling medicine to help control your pain. You will be given a button which is connected to a special pump. You can press the button when you feel the pain coming on.

**Nerve blocks** – These are local anaesthetic injections given near nerves in the area where the pain is. It should give you relief for 6-12 hours. The block may make your limbs feel heavy and difficult to move. This is nothing to worry about and will slowly wear off. When you are discharged, we will follow you up with a phone call.

**Epidurals** – An injection is given into your back that blocks pain over your wound. Local anaesthetic and pain killing medicines are given through the epidural to help ease pain. The epidural may be left in for a few days after surgery. If you are having an epidural, your anaesthetist will give you more information about this on the day of surgery.

### Common side effects of pain medicines

- Drowsiness
- Nausea and vomiting
- Constipation
- Itch or skin rash
- If you have had a local anaesthetic nerve block, you may feel some tingling or numbness

## When you go home

Some strong pain killers may affect your judgement. It is important you take this medicine exactly as directed. You should arrange for a responsible adult to take you home and stay with you for 24 hours.

For your own safety, when taking strong painkillers we recommend that you:

- Do not drive a car, ride a bike or operate machinery including power tools
- Do not make important personal or business decisions
- Do not drink alcohol or take unprescribed sleeping tablets
- Never share your medicine with others. Use it only for the condition for which it was originally prescribed.
- Make sure you store your painkillers in a safe place out of reach of children. Unused medicine should be returned to your local pharmacy.
- Local anaesthetics take time to wear off completely. If part of your body is still numb, you need to take care not to injure yourself.