

## Patient information

# Managing your post-surgical pain at home following discharge from the main West Suffolk Hospital

### Urgent concerns following discharge

If you have any concerns or questions about your recovery or operation following discharge, contact the ward that you were discharged from by using the **main hospital** switchboard number:

**01284 713000**

**If you have severe pain or develop new pain, seek urgent medical attention either via your GP, the hospital emergency department or by calling 999.**

### Preparing for discharge:

During your hospital stay the anaesthetists, doctors and nurses on the ward will have gradually transferred you to a regime of painkillers that can be managed at home. This may have involved input from the specialist acute pain team in the hospital. In some cases, this team will arrange follow-up for you in an outpatient clinic to review your progress after discharge. Your pain control on discharge is likely to involve a combination of different medications.

### Types of pain relief available at home:

Common medications that we advise patients to use for pain relief after an operation include:

- **Paracetamol:** It is the basis of post-operative pain management and should be taken regularly. Other painkillers may be added if required. It is a good painkiller for mild to moderate pain and should be taken regularly every 6 hours. It also

helps to increase the effect of other painkilling medication. Never exceed the maximum dose and never take paracetamol with other combination paracetamol-containing painkillers eg co-codamol.

- **Ibuprofen:** This is a very effective anti-inflammatory drug and can be taken every 6 - 8 hours. It is not suitable for everyone. If you are unsure about taking Ibuprofen ask your doctor, a pharmacist or read the product information leaflet.
- **Compound pain killers:** (eg co-dydramol; co-codamol). These drugs contain paracetamol and an opioid. As the pain diminishes, stop taking these drugs and then ONLY take paracetamol, until the pain has gone. Never take paracetamol and paracetamol containing compound painkillers within 6 hours of each other.
- **Opioid painkillers:** These are strong pain killers and include codeine, dihydrocodeine, morphine and other morphine-like preparations. These are normally prescribed for moderate to severe types of pain. Opioid painkillers are safe to be taken with paracetamol and ibuprofen if your pain is moderate to severe. They can make some people feel dizzy and sick.

If you feel you are not getting any pain relief from taking codeine, you may be one of the small numbers of people for whom codeine does not work well. Please see your GP for an alternative. Morphine oral solution (Oramorph®) is a strong opioid painkiller and may be part of your discharge medication only if you were given it during your stay. Draw up the prescribed volume of morphine in the dedicated syringe and slowly press the plunger with the syringe tip in your mouth. You should not require morphine more than once every 4 hours. Dihydrocodeine is different to codeine and is generally more reliable as a painkiller. Once your pain has resolved, any remaining unused strong opioids should be returned to your usual community pharmacy or dispensing practice for safe disposal.

## **Pain relief at home:**

Your anaesthetist or the doctors and nurses on the ward, or a combination of everyone, will make a plan with you before you leave the hospital about how to manage your pain at home.

Your own supply of paracetamol and medication such as ibuprofen may be sufficient. Depending on the surgery you have had you may be provided with a short supply of stronger painkillers. You may be discharged with opioid based painkillers. You will only be provided with a few days' supply. It is important that reduce and stop these medications as soon as possible as their continued use can result in significant harm including addiction. You may be given a plan for reducing these medications from the hospital or advised to make an appointment with your GP to make a plan together.

It is better to take your painkillers regularly for a few days to ensure you are comfortable rather than waiting until you are in pain before taking them. As healing occurs you should feel less pain. If your pain remains severe for more than a few days or is not controlled by your painkillers, you should contact your GP or attend the emergency department at the hospital.

Take your painkillers to match the severity of pain you are experiencing. It may be useful to take painkillers 30 minutes before physiotherapy or doing more activity. Allow 20 - 30 minutes for the painkillers to work.

How to take your painkillers:

Paracetamol: 6-hourly  
Ibuprofen: 6 – 8-hourly  
Codeine: 6-hourly  
**or**  
Dihydrocodeine: 4-hourly  
**or**  
Morphine: 4-hourly

The medicines are most effective when given at staggered times throughout the day, so that as one wears off the other is working.

#### **WARNING**

- Do not exceed the daily dose of your painkillers
- Do not take alcohol while taking painkillers
- Driving: Please be aware that opioid drugs may impair your driving ability

***You may be liable to prosecution if your driving is impaired whilst you take these drugs.***

Further information can be found at [www.britishpainsociety.org](http://www.britishpainsociety.org).

## **Other information**

- **Constipation:** Painkillers can cause constipation. If you develop constipation you can buy simple laxatives at any chemist.
- **Food:** It is advisable to always take ibuprofen with food as it can irritate your stomach.
- **Rest:** Using pillows or cushions to support you can make you more comfortable.
- **Heat:** A hot water bottle, a heated towel or a heat pad can help relieve pain, but you must be careful not to overheat the skin as this can cause bleeding.
- **Cold:** A cold flannel or a bag of frozen peas wrapped in a towel may help to reduce swelling.
- **Massage:** A gentle massage around the affected area may also help but be careful not to rub too hard over the wound as it can affect healing.

- **Distraction therapy:** Tension makes pain feel worse, so anything that will help you relax and take your mind off the pain will help.
- **Complementary therapies:** If you have previous experience of using complementary therapies such as self-hypnosis, acupuncture, aromatherapy, reflexology or a TENS machine, inform your complementary therapy practitioner who may be able to help you prepare for your operation.

## Stopping painkillers

You should start to reduce your painkillers that you are taking as your discomfort decreases.

Discontinue the strongest painkillers first (e.g. oral morphine or codeine). Then stop ibuprofen, if you are taking this. The last painkiller that you should stop is paracetamol.

If you need any help or information please contact the ward you were discharged from via the main hospital switchboard number on the first page of this leaflet.

## Time of last drugs given in hospital:

In order to ensure that you do not overdose or miss doses of pain killers once you are home it is helpful to fill in the timings of the last doses you received in the hospital:

Drug	Time
Paracetamol	
Ibuprofen	
Codeine or Dihydrocodeine or Morphine	

If you find it helpful, use the chart below to help you keep a record of the drugs you have taken

Day	Pain Score (0-10)	What tablets did I take?
Day of discharge		
Day 1		
Day 2		
Day 3		
Day 4		
Day 5		

Day 6		
Day 7		

If you feel that the number of painkillers you are needing is not reducing, then you should seek advice. It may be a sign that you are not healing as expected after the operation.

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email [info.gov@wsh.nsh.uk](mailto:info.gov@wsh.nsh.uk). This will in no way affect the care or treatment you receive.

**If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) <https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>**



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