



Managing your pain medicines at home

A guide for patients returning home after surgery



This brochure explains how to use your prescribed pain medication, both safely and effectively at home

- Pain following surgery is common and felt by most people
- Managing your pain at home is an important part of your recovery
- The aim is for you to have a tolerable pain level that allows you to get moving and will improve your recovery time

Medicines for reducing pain

- Many medicines work in different ways for reducing pain.
- Using a combination of simple pain therapies like paracetamol and anti-inflammatory medicines, may allow for lower doses of, or no need for strong pain medicine.
- This reduces the risk of unwanted side effects of strong pain medicines.
- There are many 'brand' names, forms and strengths for the same type of pain medicine and this can cause confusion.

Before you take pain medicine, you must tell your doctor or pharmacist if you:

- Have any allergies to medicines, especially pain medicines
- Have any other medical conditions
- Are pregnant or breastfeeding
- Take other regular medicine or herbal supplements

❑ Paracetamol

[Panadol®, Panamax®, Panadol Osteo®]

Paracetamol is a safe and well-tolerated medicine. It helps **ease mild to moderate pain** and can reduce the need for other strong pain drugs.

Other medicines may also contain paracetamol.

Examples include cold and flu tablets or other stronger pain combination tablets, such as Prodeine® and Panadeine Forte®. If you are unsure if a product contains paracetamol, check with your pharmacist.

Do not exceed the maximum daily dose of 4000mg of paracetamol.

❑ Non-steroidal anti-inflammatory drugs (NSAID) [celecoxib, diclofenac, ibuprofen, indomethacin, meloxicam]

NSAID's reduce inflammation [swelling] and provide relief from **mild to moderate pain** following surgery.

NSAID's are generally well tolerated. In some people, they can cause stomach pain, reflux, gas or diarrhoea. Taking your medicine with a meal may help this.

❑ Strong pain medicines [codeine, tramadol, oxycodone, tapentadol]

Opioid medicines are a **strong form of pain medicine**, like morphine. The management of strong pain after surgery may require opioid medicines in **addition** to paracetamol and NSAIDs.

Opioid medicines are recommended for the **short-term** management of strong pain. Strong pain is not expected to last long. As your body heals, you will experience less pain and you can reduce or withhold your dose.

Opioids are either long acting [also known as slow-release] or fast acting [also known as immediate-release].

❑ Long acting opioids

Provide steady pain relief over an extended period [usually 12 hours], for **severe and chronic pain**.

❑ Fast acting opioids

Work quickly to help **strong intolerable pain**, when other medicines like paracetamol or NSAIDs are not effective by themselves.

When do I stop my pain medicine?

As your condition improves, you can reduce the amount of pain medicine you take in steps. Start with your strongest pain medicine.

1. If you are using a long acting opioid start by reducing this. Only take your night-time OR day-time dose. If your pain continues to be well controlled, you can stop this medicine
2. If your pain remains tolerable, you can also reduce or stop your fast acting opioid
3. If you are taking anti-inflammatories, you can reduce or cease your dose
4. Lastly stop your paracetamol

Hints and Tips:

- Good pain management is important for both your health and recovery
- Only take your opioid medicine for the condition for which it was prescribed by your doctor and do not take more than the prescribed dose
- It is important you store medications safely, particularly out of reach of children
- Never share your medicines
- It is not necessary to keep opioid pain medicines for future use. Return unused medicine to your local pharmacy for disposal
- There is no need to continue to take your pain medicines once you have recovered. If you feel you need to continue to take them, please consult your doctor
- A Consumer Medicines Information (CMI) leaflet, is available from <https://www.ebs.tga.gov.au/> to provide useful information on your specific medicine

A note on addiction or dependence

Strong pain medicines (opioids) are not recommended for long-term use, as they are addictive and harm mental function. If you continue to have strong pain, see your doctor for assessment and review.



Common questions

What are the side effects of opioid medicines?

Common side effects of opioids are drowsiness, constipation, dizziness, nausea and vomiting.

- Do not drink alcohol or take sleeping tablets
- Do not drive, ride a bike or operate machinery (including power tools)
- Do not sign legal papers or make important personal or business decisions
- Do not take more tablets than have been prescribed

Do I need to take a laxative?

Constipation is common when using opioids and this may cause great discomfort after surgery. Reduce the risk of constipation by:

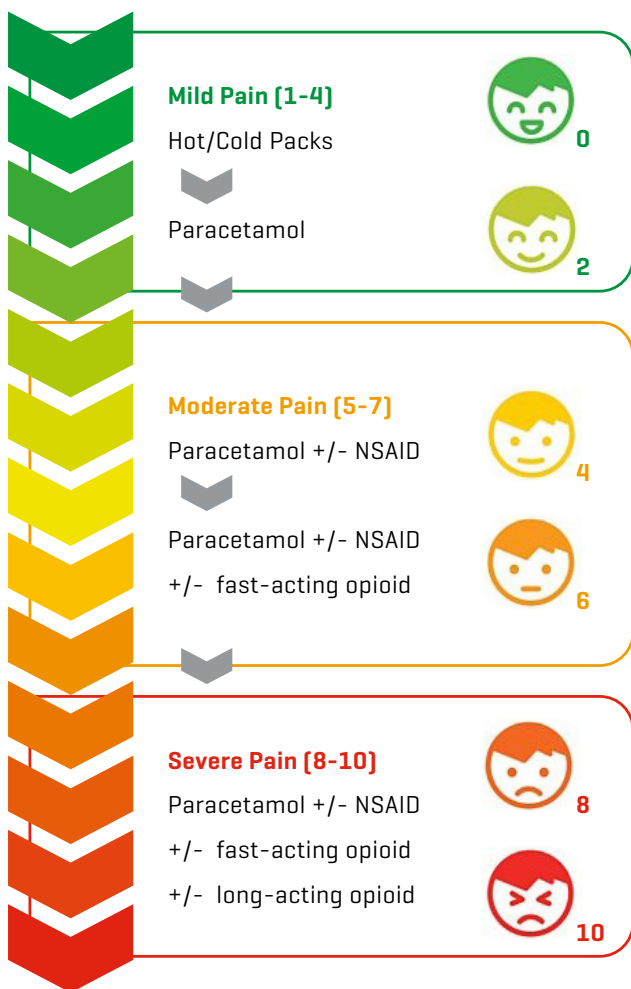
- Drinking plenty of water
- Maintaining a diet high in fibre
- Increasing your physical activity (if appropriate)
- Taking a laxative (such as Movicol® or Coloxyl and Senna®) regularly for the duration of your opioid therapy

How do I store and dispose of my opioid medicines?

- Store medicines in a safe place, out of eyesight and out of reach of children
- Return unused medicine to your local pharmacy for disposal. Do NOT keep opioid pain medicines for future use. Never share your opioid medicines with anyone else

Pain Assessment and Management Plan

Pain Scale: Give your pain a score
[0 = no pain 10 = the worst pain imaginable]



Disclaimer:

This information is intended as a guideline only. It reflects the consensus of the authors at the time of publication. The sources used are believed to be reliable and in no way replace consultation with a health care professional.