Patient Information Managing your pain after surgery

Some of the following medications have been prescribed to you for pain relief following your surgery.

Generic Name	Common Brand Name(s)	Used For
Paracetamol	Panadol, Panadol Osteo, Panamax	Mild to moderate pain
Non-Steroidal Anti-inflammatory Drugs	Voltaren, Brufen, Nurofen, Naprosyn	Mild to moderate pain
Tramadol	Tramal	Moderate to severe pain
Oxycodone (immediate release)	Endone	Moderate to severe pain
Oxycodone (slow release)	Oxycontin	Moderate to severe pain
Oxycodone/Naloxone slow release	Targin	Moderate to severe pain
Paracetamol/Codeine	Panadeine Forte	Moderate to severe pain
Tapentadol	Palexia	Moderate to severe pain
Other:		

Four facts about pain relief medications

- Pain relief medications (or pain relievers) provide temporary pain relief — they do not treat the cause of the pain.
- 2. Some types of pain respond better to certain pain relievers than others.
- 3. Each person may have a slightly different response to different types of pain relievers.
- 4. Pain relievers have possible side effects as well as benefits, so it is important to know how to use them safely.

When do I treat my pain?

Different types of pain relievers have different strengths and are used for different levels of pain (as shown in the table above).

Regular paracetamol and/or non-steroidal antiinflammatory drugs (NSAIDs) work well with mild to moderate pain. Stronger pain relievers can be used in addition for moderate to severe pain.

Once your pain starts to reduce, you can reduce the pain medication in order of strength. This is done by reducing the strongest medication first.

For example:

Reduce or stop taking any slow-release oxycodone, slow or immediate-release tapentadol, or Panadeine Forte

THEN

Reduce or stop taking immediate-release oxycodone and/or tramadol

THEN

Reduce or stop taking paracetamol and/or non-steroidal anti-inflammatory drugs.

Remember

Don't mix and match pain relief medications from hospital and home.

Please see your doctor if:

- · Your pain worsens after you leave hospital
- · The medication is no longer controlling your pain
- · Pain persists after your medication has run out

Prevention of constipation

Make sure you are having enough fluids and fibre. You may also need to take a laxative when you start medications which contain oxycodone, codeine or tramadol. This will help to prevent you becoming constipated. Please talk to your doctor or pharmacist about which laxatives may be best for you.

Immediate release medications

An immediate release product means that the tablet releases the medication into your body at the one time.

Slow (controlled) release medications

A slow or controlled release product means that the tablet gradually releases the medication into your body. The usual dose is 1 tablet twice a day regularly (every 12 hours).

These tablets should be swallowed whole and not broken, crushed or chewed.

If you have any questions about your pain medications, or your pain is not adequately controlled, contact:

- 1. Your doctor
- 2. Cabrini Pharmacy (03) 9508 1471
- 3. Cabrini Emergency Department (03) 9508 1500



Managing your pain after surgery

Paracetamol

Paracetamol is used to treat mild to moderate pain. It is an extremely effective pain reliever and when taken regularly, reduces the need for stronger pain relievers. When the correct dose of paracetamol is taken, side effects are rare.

Taking more paracetamol than recommended on the package will not provide better pain relief and can lead to overdose and serious side-effects.

There are many products that contain paracetamol. Many products also contain paracetamol in combination with other medications such as codeine to increase the strength of the medication. Check the packaging of all of your medicines to ensure you are not doubling up on the same active ingredient.

Remember: Do not take more than 8 tablets or 4000 mg of paracetamol in 24 hours.

Non-steroidal anti-inflammatories (NSAIDs)

NSAIDs are non-steroidal anti-inflammatory drugs that are used to treat mild to moderate pain due to inflammation and swelling.

NSAIDs are a group of related pain medicines that have different active ingredients. You may be prescribed the following NSAIDs: ibuprofen (Nurofen, Brufen), diclofenac (Voltaren), naproxen, meloxicam or celecoxib.

NSAIDs are available on their own or in combination with other active ingredients, such as codeine. They do not work in the same way as paracetamol so you can continue to take paracetamol tablets along with NSAIDs if both are prescribed, as long as your kidneys and liver are functioning normally.

NSAIDs should be taken for approximately 2 to 3 days after surgery unless your doctor has given you specific orders.

Common side effects with NSAIDs include nausea, dizziness, heartburn and indigestion. Other side-effects may be more serious, including stomach bleeding or kidney problems.

NSAIDs may interfere with some other medications, including blood thinning medications and blood pressure lowering medications.

Remember to take anti-inflammatories with food.

Tramadol

Tramadol is a pain reliever prescribed for moderate to severe pain. It is available in several strengths. It is also available in both immediate release and slow (or controlled) release forms.

The immediate release form can be taken up to 4 times a day. The slow (controlled) release form must not be taken more than every 12 hours.

Before taking this medication please let your doctor know if you have a history of seizures or are pregnant or breastfeeding, or taking anti-depressants, or your kidneys are not working properly, or you have any lung disease.

Common side effects include nausea, drowsiness, constipation and sweating.

Tramadol may interfere with some other medications, including anti-depressants, warfarin, alcohol and St John's Wort.

Oxycodone

Oxycodone is a pain reliever that is used for moderate to severe pain.

It is available in several strengths and both immediate release and slow (controlled) release. It may be prescribed for you to take when other pain relief medications are not sufficient to control your pain.

Common side-effects are nausea, vomiting, itchiness, skin rash, drowsiness and constipation.

Oxycodone may interfere with some other medications, including sleeping tablets, sedatives, alcohol and anti-depressants.

Oxycodone Immediate Release – Endone®

Endone® takes about 20 minutes to reduce pain.

The usual dose is 1 to 2 tablets (5-10 mg) every 4 to 6 hours as needed if the pain is not controlled by your other pain medication.

Oxycodone Controlled Release - Oxycontin®

The usual dose is 1 tablet twice a day regularly (every 12 hours).

Oxycodone/Naloxone Controlled Release – Targin®

Oxycodone is also available in a fixed combination dose with naloxone – the naloxone helps to reduce the constipating effects of oxycodone. The usual dose is 1 tablet twice a day regularly (every 12 hours).

Tapentadol

Tapentadol is a pain reliever that is used for moderate to severe pain. It is available in several strengths and both immediate release and slow (controlled) release. It may be prescribed for you to take when other pain relief medications are not sufficient to control your pain.

Common side-effects are nausea, vomiting, dizziness, drowsiness and headaches.

Tapentadol may interfere with some other medications, including sleeping tablets, sedatives, cough medicines, and anti-depressants.

Tapentadol Immediate Release - Palexia IR®

Palexia IR® takes about 20 minutes to reduce pain.

The usual dose is 50-100 mg every 4 to 6 hours as needed if the pain is not controlled by your other pain medication.

Tapentadol Controlled Release – Palexia SR®

The usual dose is 1 tablet twice a day regularly (every 12 hours).

