

Patient information factsheet

Pain relief at home

We have written this factsheet to help you manage your pain effectively at home using pain relief medication. It explains the different types of pain relief medications you may be prescribed and their common side effects. We hope it will help to answer some of the questions you may have. If you have any further questions or concerns, please speak to a member of our team.

Why do I need pain relief medication?

When you leave hospital, you are likely to continue to experience some pain and discomfort. This is normal. We will send you home with some pain relief medication to help minimise the amount of pain you experience. The type and amount of pain relief medication we prescribe will be different for everyone, as everyone feels pain differently. Regardless of which pain relief medication we prescribe you, it is important that you manage your pain effectively, as this will help with your recovery and allow you to return to your usual day-to-day activities faster.

Types of pain

There are different types of pain and you may experience more than one type. We have included the most common types of pain below:

Acute pain (short-term pain)

Acute pain is a short-term pain that is caused by something specific, such as an operation, injury or illness. It can be severe, but it usually gets better quite quickly (within a few days or weeks).

Different pain relief medications can be used to treat acute pain and are usually used in combination to achieve the best results. Opioid medications, such as codeine, dihydrocodeine and morphine, can be effective in treating acute pain. However, they become less effective over time so should only be used for a short period of time. Treatment for acute pain is usually only needed during the recovery period.

Chronic pain (long-term pain)

Chronic pain, also known as persistent pain, is a long-term pain that causes a variety of symptoms including pain, immobility (difficulty moving), low mood and problems with sleeping. Unlike acute pain, chronic pain is often difficult to treat and most people will never be completely pain free.

Management of chronic pain is often complex and different treatments may work better for different people. However, chronic pain is usually best managed with a combination of complimentary treatments, such as physiotherapy and cognitive behavioural therapy, and certain medications. Opioids are not suitable for chronic pain.

Neuropathic pain

Neuropathic pain is a type of chronic pain associated with damage to the nerves. Examples of neuropathic pain include sciatica, pain after an amputation, pain after a shingles infection and pain after spinal surgery.

Neuropathic pain is often described as:

- sharp
- intermittent (not continuous)
- a burning sensation

Pain relief medications to help with this type of pain include amitriptyline, pregabalin and gabapentin. They usually take time to work and more than one type may be needed. Opioids are not suitable for neuropathic pain.

Cancer pain

Cancer pain is often a result of tissue damage. It can be caused by the cancer itself (the tumour) or cancer treatment, such as radiotherapy. Cancer pain can be severe and may require large amounts of pain relief medications.

When a person's cancer has been cured, or if it goes on for a long time, the pain may become chronic, and may therefore become difficult to treat.

Common pain relief medications

There are three main groups of pain relief medications:

Paracetamol

Paracetamol is an excellent pain relief medication that has very few side effects. It is usually the first pain relief medication you will be advised to take and the last one to stop.

- **Do** continue to take paracetamol even if you are prescribed stronger pain relief medications, as it also helps to improve the effect of other pain relief medications.
- **Don't** take paracetamol with other medications containing paracetamol, such as co-codamol or cold and flu treatments, as there is a risk of overdose.

Paracetamol is easily available and inexpensive, so you may not receive it in your discharge pack.

Paracetamol can be taken regularly if you are in pain. The usual dose for adults is one or two 500mg tablets up to four times in 24 hours. The maximum dose is 4g (eight tablets) in 24 hours. You must always leave at least four hours between doses.

Anti-inflammatory medications

Anti-inflammatory medications are usually used in addition to paracetamol and can provide good pain relief. Examples of anti-inflammatory medications include ibuprofen, diclofenac and naproxen.

You should not use anti-inflammatory medications if you have:

- severe asthma
- kidney problems
- an increased risk of bleeding

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If you have heart disease or are taking blood thinners, you should seek advice from your discharging doctor before taking anti-inflammatory medications.

You may not be prescribed or advised to take anti-inflammatory medications if you have had a bone fracture, as they can sometimes prevent your bones from healing.

If you think you have been prescribed an anti-inflammatory medication and have one of these conditions, please contact your GP before taking any doses.

You should ideally take anti-inflammatory medication with food. If you need to take anti-inflammatory medication on a regular basis for more than two weeks, you will also need to take another type of medication called a stomach protector (also known as a PPI), such as omeprazole. If this is the case and you have not been prescribed a stomach protector, please speak to your GP.

Opioid medications

Opioid medications are strong pain killers that work well for short-term acute pain. Examples of opioids include codeine, dihydrocodeine, tramadol, morphine and oxycodone.

Opioid medications should only be taken for a short period of time, as the longer they are taken, the less effective they become at managing pain. Opioid medications also have significant side effects that become more severe the longer they are used or if the dose is increased.

Common side effects of opioid medications include:

- nausea (feeling sick) and vomiting (being sick)
- itching
- constipation
- drowsiness (excessive use can potentially cause dangerous drowsiness)
- hallucinations
- addiction

Do not drink alcohol while taking opioid medication. This may cause excessive and dangerous drowsiness.

Due to the potential side effects and reduced effectiveness, opioid medications should be stopped as soon as your pain improves. If you need additional opioid medications after you leave hospital, you will need to contact your GP. Your GP will also be able to:

- help with reducing opioid use (if you have been taking them for a longer period of time)
- offer advice on constipation and laxatives

Opioid medications may affect your ability to drive. Please read the section on driving at the end of this factsheet for more information.

Always read the information leaflet provided with the pain relief medication before taking it.

What should I do if I am still in pain when I leave hospital?

Make sure you are taking the pain relief medication you have been prescribed as directed (including paracetamol). Do not exceed the maximum dosage prescribed.

If you are still in pain, and the pain is more than we have advised you to expect, then contact your GP for advice. In an emergency, please go to your nearest emergency department.

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Can I take more than one pain relief medication at the same time?

It is possible to take one pain relief medication from each of the three groups at the same time. For example, paracetamol, ibuprofen and dihydrocodeine can be used together at the recommended doses.

Do not take more than one medication from each group. For example, do not take ibuprofen and diclofenac, or dihydrocodeine and tramadol together.

How should I stop taking my pain relief medications?

If you have been taking a combination of paracetamol, anti-inflammatory and opioid medications regularly, it can sometimes be confusing to know how to stop them. Do not stop all of them suddenly, as your pain may return and it will then be harder to get back under control.

You should keep taking paracetamol regularly while you gradually stop the opioid-based medication first, and then the anti-inflammatory medication (if you were able to take this type of medication).

Pain can often feel worse at night as there is less to distract you from the feeling. If this is the case, stop the daytime doses first and continue to take pain relief medication at night until you feel ready to stop these doses.

What should I do if I am running out of my pain relief medications?

If the pain relief medication we prescribed you before you left hospital is running out and you feel you still need it, you can purchase paracetamol and ibuprofen over the counter. Please check whether ibuprofen is suitable for you with a pharmacist or your GP.

Opioid medications, such as codeine and tramadol, require a further prescription, so you will need to contact your GP. They will assess your pain and decide if a further prescription is the most appropriate course of action or whether your pain needs any further investigation.

What should I do with left over medications?

Never give your prescribed medications to other people, as they may not be safe for them to take. Take all old or unwanted medication to a pharmacy for safe disposal. Never dispose of medication in normal household waste or flush it down a toilet.

Can I drive while taking pain relief medications?

Certain pain relief medications, such as opioids, some anti-inflammatory medications and anti-depressants, can impair your ability to drive safely. You must not drive if you feel that your driving ability has been impaired.

Certain factors that may affect your driving ability include:

- starting (initially) or increasing the dose of a pain relief medication
- taking more than one type of pain relief medication
- drinking alcohol while taking pain relief medication

It is your duty to determine if you are safe to drive or not. If you are advised by a medical professional not to drive, you are legally obliged to follow that advice.

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Contact us

If you have any questions or concerns, please contact us.

Southampton Medicines Advice Service
University Hospital Southampton NHS Foundation Trust
Southampton General Hospital
Tremona Road
Southampton
Hampshire
SO16 6YD

Telephone: **023 8120 6907** (Monday to Friday, 9am to 6.30pm)

Email: medicinesadvice@uhs.nhs.uk

Useful links

Faculty of Pain Medicine 'About Pain'

Website: www.fpm.ac.uk/sites/fpm/files/documents/2019-09/FPM-OA-About-Pain.pdf

Faculty of Pain Medicine 'Driving and Pain'

Website: www.fpm.ac.uk/sites/fpm/files/documents/2019-07/FPM-Driving-and-Pain-members-information.pdf

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