

# Taking painkillers after your surgery

**This leaflet aims to answer your questions about taking painkillers after surgery. Inside each box of painkillers there should be an information leaflet from the manufacturer, specific to that medicine. Please make sure that you read these leaflets alongside this one.**

**If you have any questions about your painkillers or any other medicines, please contact your local pharmacist (chemist) or GP for advice. Alternatively you can call our Pharmacy Medicines Helpline (contact details are at the end of this leaflet).**

## Why do I need painkillers?

Painkillers provide relief from pain. They can help you to feel more comfortable and can speed up the recovery process.

## Do I need to take more than one type of painkiller?

One type of painkiller may not be enough to control your pain, so you might need to take two or more types of painkiller at the same time. The painkillers work in different ways so taking them together will help to control your pain better and minimise side effects.

Four types of painkillers are commonly recommended after surgery:

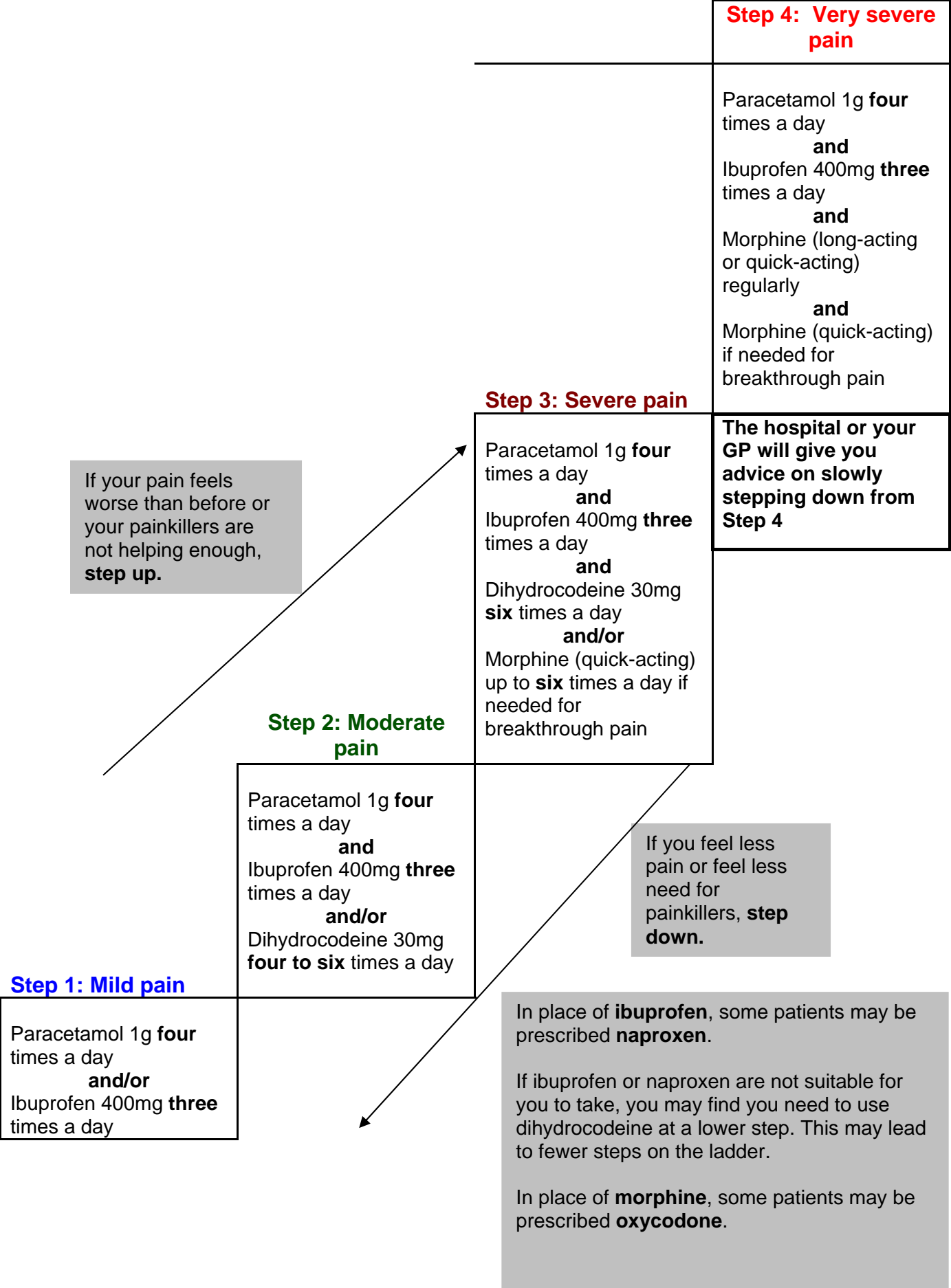
- Paracetamol
- Non-steroidal anti-inflammatory drugs (such as ibuprofen or naproxen)
- Weak opioids (such as dihydrocodeine or codeine)
- Strong opioids (such as morphine or oxycodone)

These are used in different combinations depending on how much pain you are in, and what painkillers suit you. The different combinations address different levels of pain. Some people find it useful to see these as steps on a ladder (see Figure 1).

Paracetamol and non-steroidal anti-inflammatory drugs work differently, so can be taken at the same time. Taking them together may be more effective than using either one alone. However, not everyone can take non-steroidal anti-inflammatory drugs. For example, if you have a history of stomach ulcers they may not be suitable for you and if you have asthma, they may worsen it. If you cannot take non-steroidal anti-inflammatory drugs, you may need to take a moderate painkiller earlier on (at a lower step in the pain ladder).

A moderate painkiller, such as dihydrocodeine or codeine, may be prescribed and you can take it with paracetamol and/or a non-steroidal anti-inflammatory drug to control moderate pain – they are more effective working together in combination than if you only take one painkiller.

Figure1: The pain ladder



If your pain is severe, we may give you stronger painkillers such as morphine (or oxycodone). These work well together with paracetamol and ibuprofen. We may give you morphine in addition to regular dihydrocodeine for you to take for breakthrough pain. Alternatively, morphine may be given instead of dihydrocodeine for you to take regularly. Breakthrough pain is pain that is not controlled by your regular painkillers.

There are different preparations of morphine (or oxycodone) that are taken in different ways. We may give you morphine as a quick-acting preparation (liquid or tablets) which can be taken up to six times daily. There are also long-acting (or modified-release) morphine tablets that are taken twice a day. If you are taking long-acting morphine tablets, the quick-acting morphine can be taken for breakthrough pain.

Some patients may be prescribed oxycodone instead of morphine. Oxycodone is a strong painkiller similar to morphine that is often used if patients cannot tolerate morphine. This also comes as long-acting tablets and quick-acting capsules or liquid.

## **Are there any side effects?**

There are possible side effects with all medication and people react differently to different painkillers. Please read the information leaflet that comes with your medication to find out the side effects for that particular medicine.

Paracetamol rarely causes any problems, but allergic reactions such as a skin rash occasionally occur.

The most common side effects of non-steroidal anti-inflammatory medicines are stomach pain, nausea, indigestion and irritation to the stomach. Stomach irritation is less likely with ibuprofen. Taking the tablet after food helps to protect the stomach and some patients are given an extra medicine (for example, omeprazole) to protect their stomach further.

The most common side effects with dihydrocodeine, codeine, morphine and oxycodone are drowsiness, constipation and nausea. Drowsiness usually wears off after a few days, however please take extra care when driving or operating machinery as your reactions may be slower than usual. It is also strongly recommended that alcohol is avoided whilst taking opioid analgesia (painkillers) as this may increase the likelihood of drowsiness. If constipation is a problem, you can take a laxative such as senna, which can be purchased over the counter from your local pharmacist or prescribed by your GP. Nausea usually wears off, but if it does not, an anti-sickness medicine can be prescribed by the hospital or your GP.

## **Do I need to take all of my painkillers?**

People experience pain differently, so it depends on how you feel. Some people can take paracetamol and ibuprofen/naproxen regularly and keep the dihydrocodeine in case they feel severe pain. Other people need to take all three medicines initially to control their pain. Some people may also have to take morphine (or oxycodone) for very severe pain. If the pain occurs frequently, make sure you take the painkillers regularly to prevent the pain from building up. The different combinations are like steps on a ladder. If the combination of painkillers you are taking is not enough, try the next 'step' or combination. You will need to see your GP if the painkillers you have been given do not relieve your pain.

After surgery, you are most likely to start on step 4 or 3 and then gradually work down the ladder. As a guide, if you are taking two or less 'if needed' painkillers per day then you may be able to step down to the next step on the ladder.

### **How often should I take my painkillers?**

Please follow the instructions on the label of each box of your painkillers. Never take more tablets than prescribed as this can be dangerous to your health. If the painkillers are not controlling your pain, please speak to your GP.

### **How long do painkillers take to work?**

It takes about 20 to 30 minutes for the painkillers to start working but they will take up to one hour to have their full effect. Long-acting preparations release the medicine slowly over 12 hours.

### **Do I need to take my painkillers with food?**

Please follow the instructions on the label. Some painkillers should be taken after you have eaten to minimise any irritation to your stomach. If it is not a meal time, have a small snack or glass of milk before you take them.

### **What should I do if I take the wrong amount of painkillers?**

It is important that you follow the instructions on the label of your medicines and do not exceed the recommended dose of painkiller, or take it more often than the instructions tell you to.

If you take more than the prescribed dose of your painkillers, please contact your local pharmacist or your GP for advice. You should always seek advice as soon as possible, even if you feel well, as some medicines have a delayed effect. Make sure you have your medicines with you so that you can show/tell a medical professional what you have taken.

Paracetamol can be harmful if too much is taken (overdose). Although the effects of an overdose may not be obvious, they can be serious and need treatment. If you have taken more than the recommended amount, either as a single dose or in a 24-hour period, please contact your GP or your local A&E department as soon as you realise.

### **What should I do if I forget to take my painkillers?**

If you forget to take your painkillers and you are still in pain, take the next dose as soon as you remember. Always allow at least four hours between doses of paracetamol, ibuprofen dihydrocodeine or codeine and do not take more than the recommended daily amount. For morphine (or oxycodone) and naproxen, always follow the instructions on the label.

### **Where should I keep my painkillers?**

All medicines should be kept in a cool, dry place, out of reach and sight of children.

### **What if I am taking other medicines?**

During your hospital stay, your doctor will review any medicines you are already taking to make sure they are safe to take with any painkillers you are given. Please make sure you tell your doctor, nurse or pharmacist about any current medication you are taking before you leave hospital.

Please be aware that paracetamol may be an ingredient of combination painkillers (for example co-codamol) or over-the-counter cough and cold remedies. It is therefore important that you do not take more than the maximum daily dose of paracetamol from all the medicines that you take. If you are unsure whether you can use other medicines at the same time as the paracetamol, please ask your doctor or pharmacist.

If you have any questions in general about your other medicines, please speak to your pharmacist or GP, or call our Pharmacy Medicines Helpline.

## **What if I don't feel any pain?**

You might not be in any pain when you first leave hospital because the painkillers we have given you are still working.

Pain is much harder to control if you let it build up. It is usual for patients to take their painkillers regularly for the first few days after leaving hospital and to then gradually reduce them.

If you did not feel much pain while in hospital and were not taking painkillers regularly beforehand, you can just take them when and if necessary once you are at home (within the prescribed dosing instructions). Start with the painkiller for mild pain. You should start taking your painkillers at the first signs of pain when it is easier to control. If you are still in moderate or severe pain one hour after taking the first painkiller, you may need to take your stronger painkiller (if you have not taken it already).

## **When should I stop taking my painkillers?**

Unless we have given you different instructions, reduce or stop the strongest painkiller, dihydrocodeine or morphine (if you are taking it), three to five days after leaving hospital. If your pain remains well controlled, continue to take the other painkillers and then reduce the amount again in the next few days. This is like trying the next 'step' or combination down the painkiller ladder.

Usually morphine should be stopped first, then dihydrocodeine, then ibuprofen and finally paracetamol. If your pain gets worse when you stop any of the painkillers, start taking that painkiller again. You can try to stop it again in another couple of days. Please speak to your GP if your pain does not improve or if it gets worse.

If you are taking regular morphine we will explain to you before you go home how to gradually reduce your dose, as different patients need to take it for different lengths of time.

## **How can I get a repeat prescription?**

A copy of your prescription should have been sent to your GP so he/she will be able to continue prescribing the painkillers for you if you need them. Alternatively, you can buy paracetamol or ibuprofen over the counter from your local pharmacist. Any other painkillers will need to be prescribed by your GP, who will also review your progress.

## Contact us

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our Pharmacy Medicines Helpline on **020 7188 8748** (9am to 5pm, Monday to Friday).

Alternatively, please contact your GP or local pharmacist.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.guysandstthomas.nhs.uk/leaflets](http://www.guysandstthomas.nhs.uk/leaflets)

## Further information

### Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748 9am to 5pm, Monday to Friday

### Patient Advice and Liaison Service (PALS)

To make comments or raise concerns about the Trust's services, please contact PALS. Ask a member of staff to direct you to the PALS office or:

**t:** 020 7188 8801 at St Thomas'    **t:** 020 7188 8803 at Guy's    **e:** [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk)

### Language Support Services

If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

**t:** 020 7188 8815    **fax:** 020 7188 5953

### NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

**t:** 111

### NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

**w:** [www.nhs.uk](http://www.nhs.uk)

### Become a member of your local hospitals, and help shape our future

Membership is free and it is completely up to you how much you get involved. To become a member of our Foundation Trust, you need to be 18 years of age or over, live in Lambeth, Southwark, Lewisham, Wandsworth or Westminster or have been a patient at either hospital in the last five years. To join:

**t:** 0848 143 4017    **e:** [members@gstt.nhs.uk](mailto:members@gstt.nhs.uk)

**w:** [www.guysandstthomas.nhs.uk](http://www.guysandstthomas.nhs.uk)

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