



Help yourself feel more comfortable

Try to relax your body. Think about lying on the beach or listening to your favourite music, reading or any other distracting therapy. Enjoy a pleasant daydream. It may sound silly but this will help to ease the tension in your muscles which can make your pain worse.

Ask a relative or friend to massage your hands and feet with baby lotion. This can be very relaxing.

Pain relief teams

Most hospitals have a team of nurses and anaesthetists who specialise in pain relief after surgery.

You can ask to see a member of the team at any time. Your questions will be welcome. They may have leaflets available about pain relief.

Finally

For the benefit of our patients, visitors and staff, Northampton General Hospital operates a smoke-free policy. This means that smoking is not allowed on the trust site, including all buildings, grounds and car parks.

Leaflets, information, friendly advice and support on giving up smoking and on nicotine replacement therapy are available from the local Stop Smoking helpline on 0845 601 3116, the free national helpline on 0800 169069, e-mail: smokefree@npct.northants.nhs.uk and local pharmacies.

Car parking spaces at Northampton General Hospital are extremely limited and it is essential to arrive early, allowing ample time for parking. Alternatively, you may find it more convenient to arrange to be dropped off and collected.

This information can be provided in other languages and formats upon request including Braille, audio cassette and CD, please contact (01604) 544516 or the Patient Advice & Liaison Service (PALS) on (01604) 545784.

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Pain Relief

Northampton 
General Hospital
NHS Trust

Pain relief

Good pain relief is important. It prevents suffering and it helps you recover more quickly. Your anaesthetist will probably discuss different pain relief methods with you before your surgery so you can make an informed decision about which you would prefer.

Some people need more pain relief than others. Worry increases the pain people feel.

Pain relief can be increased, given more often or given in different combinations.

Occasionally, pain is a warning sign that all is not well, so the nursing staff should be told about it.

Good pain relief helps prevent complications.

If you can breathe deeply and cough easily after your operation, you are less likely to develop a chest infection.

If you can move around freely, you are less likely to get blood clots (deep vein thrombosis or DVT).

It is much easier to relieve pain if it is dealt with **before** it gets bad. So, you should ask for help as soon as you feel pain, and continue the treatment regularly.

Ways of giving pain relief

Pills, tablets or liquids to swallow - These are used for all types of pain. They take at least half an hour to work and should be taken regularly. You need to be able to eat, drink and not feel sick for these drugs to work.

Injections - These are often needed, and are given either into a vein for immediate effect, or into your leg or buttock muscle. Drugs given into a muscle may take up to 20 minutes to work.

Suppositories - These waxy pellets are placed in your back passage (rectum). The pellet dissolves and the drug passes easily into the body. They are useful if you cannot swallow or if you are likely to vomit. They are often used to supplement other methods of pain control.

Patient controlled analgesia (PCA) - This is a method using a machine that allows you to control your pain relief yourself. It has a pump which contains an opiate drug. The pump is linked to a handset which has a button. When you press the button, you receive a small dose of the drug painlessly into your blood stream. The machine is set so that you cannot give yourself an overdose.

Local anaesthetics (regional blocks and epidurals) - This type of analgesia can be very useful for relieving pain after surgery. More details are in the leaflet 'Post operative epidural pain relief'

Drugs you may receive

Opiates - These are the drugs often used for severe pain. They include morphine, diamorphine, codeine and pethidine. They may be given by tablets, injections or patient controlled analgesia. They may also be added to a spinal or epidural to give longer and better pain relief.

Some people have side-effects, the most common include feeling sick, vomiting, constipation, and drowsiness. Larger doses can produce breathing problems and low blood pressure (hypotension).

The nursing staff will watch you closely for side-effects, they can be treated with other drugs. Your reaction to opiates will affect you considerably. One in three people finds opiates unpleasant. If they make you feel very sick, controlling your pain may be more difficult.

Constipation can be a problem. If it is something you are concerned about, ask the nurses who will be able to help you.

Some other pain relievers - Drugs such as diclofenac, ibuprofen or paracetamol may be given during an anaesthetic as a suppository or afterwards as tablets. They must be used carefully by people with asthma, kidney disease, heartburn or stomach ulcers.