



Patient & Family Guide

2023

Managing Pain After Surgery

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Managing Pain After Surgery

It is common to have pain after surgery. Your health care team will help you manage your pain.

Why will I have pain after surgery?

You may have pain if:

- You had general anesthesia (medication to put you to sleep for surgery) and a breathing tube.
 - › Having a breathing tube can make your throat sore. This usually gets better in 48 hours (2 days), but it may last longer.
 - › Avoid spicy or acidic foods (like pop, citrus, or dairy) while your throat heals.
- Your skin and tissues were cut and moved.
- You had a drainage tube near the incision (cut) or in another part of your body (like your nose).
- You had an intravenous (I.V.) tube or a catheter (thin, hollow tube).
- Your muscles or joints are sore from moving in certain ways or from staying in 1 spot.
- You are in a place that you are not used to (like a hospital).

How much pain will I have?

- It is hard to know how much pain you will have after surgery. Each person's pain is different, even after having the same surgery.
- Your health care team will help you monitor your pain and give you medication as needed.
- Before your surgery, ask your health care team what to expect, like:
 - › Will I have pain after my surgery?
 - › How long will the pain likely last?
 - › How can I control my pain?

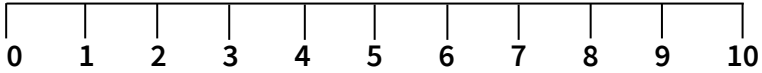
Why is it important to control my pain after surgery?

- Having less pain means putting less stress on your body. Having less stress lets your body focus on healing.
- If you feel less pain, it will be easier for you to move and breathe, which is important for your recovery.

What will my health care team do to help control my pain?

- We want to know about your pain while you are resting and while you are moving.
- You may be asked to rate your pain using a scale from 0 to 10.

- If 0 is no pain and 10 is the worst pain ever, what number would you give your pain?



Alt text: Pain scale showing numbers 0 to 10.

You can also use the words mild, moderate, or severe (very bad) to describe your pain (see page 11 for more information).

- Take your pain medication as soon as you feel pain. **Do not** wait until it is severe. Pain is harder to control when it is severe.
- Tell a member of your health care team if:
 - › you have pain that does not go away even after taking pain medication.
 - › your pain changes in any way (like from a dull ache to a sharp pain).
- The Acute Pain Service (APS) may visit you. This is a team of anesthesiologists (doctors who put you to sleep for surgery) and nurses with special training to help people with pain. If the APS visits you, they will see you 1 or 2 times a day while you are in the hospital.

What kind of pain medication will I get in the hospital?

- Pain medication comes in many forms. You and your surgeon will decide what form is right for you.
- You may get pain medication when you ask for it, or at set times.

Pills

- If your pain is **mild to moderate** and you can take medication by mouth, you will likely take pills or liquid pain medication. Pain pills take about 30 to 45 minutes to start working.

Injection

- If your pain is **moderate to severe** or you cannot take oral (by mouth) medication, you will likely get an injection. This may be given through your I.V. or using a needle injected just below your skin. Injections work faster than oral medication.

Patient-controlled analgesia (PCA) pump

- A PCA pump is a tool that lets you control your own pain medication. You will press a button to pump the medication into your I.V.
- The pump is programmed to make sure you cannot give yourself more medication than is safe for you.

Remember: Only you can push the button on your PCA pump. This is for your safety. Your support persons **cannot** push the button, even if they think you are in pain. If your support person thinks you are still in pain, they should tell a member of your health care team.

Epidural

- An anesthesiologist may give you an epidural. This is a small tube put into your back. The tube is attached to a pump with a bag of medication. The pump gives medication at all times. You will still be able to move and walk with an epidural.

Nerve block

- Your surgeon may put a small tube near the area where the surgery was done. This tube is called a nerve block. The tube is attached to a pump with a bag of medication. The pump gives medication at all times to freeze (numb) the area where you had surgery.

What are the side effects of pain medication?

Common side effects are:

- › Nausea
(feeling sick to your stomach)
- › Vomiting
(throwing up)
- › Feeling sleepy
- › Feeling dizzy
- › Feeling itchy
- › Breathing slower
- › Constipation
(not being able to poop)

Tell a member of your health care team if you have any of these side effects. We can help you manage them.

- If you have nausea, try taking your medication with food.
- If you are constipated, try drinking more liquids and eating foods high in fibre.

Can I get addicted to pain medication?

- If you have problems with addiction, you are at risk of getting addicted to pain medication.
- If you do not have problems with addiction, the risk of getting addicted to pain medication is low.
- It is important to take less medication slowly over time, as you get better and feel less pain. **Do not** suddenly stop taking your pain medication.

- Tell a member of your health care team if:
 - › there is a history of addiction in your family.
 - › you still have pain even after taking medication.
- **Do not** share your pain medication with anyone.
- Store your medication in a safe place, out of the reach of children and pets.

Important: Take any leftover pain medication to a pharmacy. They will get rid of it safely.

What can I do to help control my pain?

- Deep breathing and coughing will help to prevent lung problems, like pneumonia (lung infection).
- If you had surgery in your stomach or chest area, hold a pillow against your incision while doing your deep breathing and coughing exercises.
- It may help to change your position in bed. Ask for help, if needed.
- It may help to raise the area where you had surgery (for example, by placing pillows under it). Ask a member of your health care team if this is right for you.

- It may help to place an ice pack on the area where you had surgery. Ask a member of your health care team if this is right for you.
- Walking and doing foot and leg exercises will help to:
 - › keep your muscles strong.
 - › improve your blood flow.
 - › lower the risk of blood clots.
- Walk at least 3 times a day to lower gas pain.
- Take pain medication 30 minutes to 1 hour before an activity that may make your pain worse (like getting up or doing exercises).
- Ask your surgeon if you can also take acetaminophen (Tylenol®) or anti-inflammatory (lowers swelling) medication.
- Do something to take your mind off the pain (like reading, watching TV, listening to music, talking on the phone).
- **If your pain is severe:**
 - › If you are in the hospital, tell a member of your health care team.
 - › If you are at home, tell your primary health care provider (family doctor or nurse practitioner). **Do not** take more medication than you have been prescribed (told) by your doctor.

My Pain Plan

Fill out this plan with your health care team. Your health care team will work with you to decide which medications are best for you.

Before my surgery

Natural therapies (using ice, talking to friends or family, reading, listening to music, watching TV, elevation [as directed], exercise or activity [as allowed])

Natural therapies	When?	How long?
Example: Ice	Example: 4 times a day (7 a.m., 11 a.m., 3 p.m., 7 p.m.)	Example: 20 minutes

Pain medications

Medication	How much?	When?
Example: Aleve®	Example: 500 mg	Example: 2 times a day (8 a.m. and 8 p.m.)

After my surgery

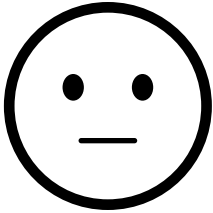
Natural therapies

Natural therapies	When?	How long?
Example: Ice	Example: 4 times a day (7 a.m., 11 a.m., 3 p.m., 7 p.m.)	Example: 20 minutes

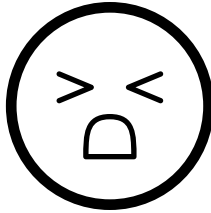
Pain medications

Medication	How much?	When?
Example: Aleve®	Example: 500 mg	Example: 2 times a day (8 a.m. and 8 p.m.)

Important: Talk with your surgeon before taking your usual medications after your surgery. They may affect your recovery.



Alt text: A drawing of a face in mild pain (not sad, not happy).



Alt text: A drawing of a face in moderate pain.



Alt text: A drawing of a face in severe pain.



Mild pain

- I hardly notice my pain. I can still do activities and exercises.
- Natural therapies and non-opioid pain medications can control this type of pain.

Moderate pain

- My pain is hard to ignore. I cannot do activities or exercise because of the pain.
- Natural therapies and non-opioid medications, if used regularly and consistently can help.

Severe pain

- All I can think of is my pain. I have trouble sleeping, exercising, and being social. Nothing can distract me from the pain.
- Natural therapies and non-opioid medications regularly, as well as opioids may be needed.

Call your surgeon if your pain lasts for longer than 72 hours (3 days). If you cannot reach your surgeon:

- › Call 811 or your primary health care provider, or go to the nearest Emergency Department right away.

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find this pamphlet and all our patient resources here:
<https://library.nshealth.ca/Patients-Guides>

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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The information in this pamphlet is to be updated every 3 years or as needed.