

Queen Elizabeth Hospital Birmingham **NHS**

Part of University Hospitals Birmingham
NHS Foundation Trust



Pain management

at University Hospitals Birmingham
NHS Foundation Trust (UHB)

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www.uhb.nhs.uk/patient-information-leaflets.htm

Introduction to pain management at Queen Elizabeth Hospital Birmingham

The majority of patients admitted to hospital for surgery, other procedures and courses of treatment need pain relief afterwards.

This booklet provides information to help you understand how this is achieved during your stay at the Queen Elizabeth Hospital Birmingham.

Further information will come at the time from the staff looking after you. Pain management is a priority and all our staff are committed to helping make your hospital stay as comfortable as possible.

Our approach to your pain management

Pain is experienced in many different forms, depending on your physical condition, previous experiences and how worried you are about your illness. Some patients may experience virtually no pain whilst others may experience a lot of pain during or after a procedure. Our approach is to manage every patient as an individual and find the best pain management solutions that work for them. Some pain, for example after a minor day-case operation, may only last a short period of time and require simple pain relieving medication. In contrast, for some conditions and patients, pain may last for a longer time and require a more complex approach to management.

Anaesthetists manage pain around the time of an operation: later on in the wards pain is generally managed by the ward clinical staff. More complex pain management for chronic conditions and palliative care is provided by specialist teams.

You will be asked about your pain by the nursing staff who carry out regular observations and by the medical staff when they review you. At these times, your pain relief medication will be reviewed and may be modified as your needs change. If you are also receiving physiotherapy and other treatments, the therapists may ask about your pain to ensure you are comfortable and get the best out of their treatments. At all other times, and between regular assessments, you should inform the staff caring for you if you are experiencing pain that has not been addressed.

Medication and other treatments used to help manage pain

Our first line of treatment for pain is usually given in the form of tablets or liquids but may be given as a suppository. Oral analgesics need to be taken

regularly and may take a few hours to be fully effective: some need to be taken before or after food. If you are unable to take medication orally an injection or intravenous infusion (via a drip) may be set up. Another approach, which is sometimes possible, is to use local anaesthetic which works directly on nerve endings and nerve fibres. These can be given to a small area, around a wound, to block major nerves to an arm or leg, or closer to the spine to cover a larger area of the body (e.g. an epidural). Specialist treatments for chronic and cancer pain may include alternative therapies and psychological therapies to help patients manage their condition.

Some medication will have side effects, such as nausea or drowsiness. You will be asked, and you need to let us know, if you are experiencing these or other side effects. We will do our best to keep these symptoms to a minimum using as low a dose as we can to control your pain, whilst giving other drugs, such as anti-sickness preparations to minimise any unpleasant effects.

The three main divisions in pain management are acute, chronic and palliative care pain management programmes.

Acute pain management

Acute pain is that which only lasts for a short period of time and is usually associated with an injury, illness or operation. Acute pain makes an individual aware that there is a clinical problem and in some circumstances promotes healing by encouraging rest. Our management aim is to control acute pain as much as possible since it is distressing and, in itself, has little therapeutic value. Although various nerve blocks may be used, the most common approach is to use oral tablets to control the pain. Paracetamol and ibuprofen are used for mild pain; codeine, tramadol and non-steroids for moderate pain; and morphine and other opioids for severe pain. These doses will be adjusted to you as an individual and as your needs change. Patients having major surgery, or experiencing severe pain, may have a patient controlled analgesia (PCA) device.

A PCA allows major analgesics to be self-administered by the patient within pre-set limits. These patients, and patients with local anaesthetic blocks or infusions such as epidurals, will be monitored daily by the Acute Pain Team.

Cancer and palliative pain management

If you have cancer, any pain caused by the underlying condition will be managed using the best available technique just as described above.

However in addition, using a holistic approach, a specialist palliative and cancer pain team will support you and your relatives by providing specialist advice and treatment when required. The palliative care team has additional literature describing their approach to making patients and relatives as welcome and comfortable as possible.

Chronic pain management

Some patients may already have long standing pain prior to their admission to hospital. We recognise that their pain may be harder to manage effectively during the hospital stay, especially if they are having additional procedures. Many chronic pain patients have more complex syndromes and needs and may have very specialised blocks and treatment schedules. These care pathways are managed by the Chronic Pain Team who provide additional and specialised leaflets to describe their activities and approach to care.

Useful links

Royal College of Anaesthetists patient information leaflets:

- [You and your anaesthetic](http://www.rcoa.ac.uk/document-store/you-and-your-anaesthetic)
www.rcoa.ac.uk/document-store/you-and-your-anaesthetic
- [Epidural pain relief after surgery](http://www.rcoa.ac.uk/document-store/epidurals-pain-relief-after-surgery)
www.rcoa.ac.uk/document-store/epidurals-pain-relief-after-surgery

British Pain Society patient information leaflets:

www.britishpainsociety.org/british-pain-society-publications/patients-publications/

University Hospitals Birmingham patient information leaflets:

www.uhb.nhs.uk/pi-pain-management.htm

Pain Management

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