

ANDREWS

Sports Medicine & Orthopaedic Center

Managing Your Pain After Surgery

It is normal to feel pain after having surgery, but that doesn't mean you need to be in agony while you recover. No option is automatically the best for everyone, so your surgeon will use a multimodal approach to treat your post-op pain. A combination of non-medication modalities (ice, heat, movement, and rest) along with medication (acetaminophen, NSAIDs, and opioids) will be utilized to help you feel comfortable while you recover.

What type of pain should I expect after surgery?

Acute post-op pain usually begins to get better 2-3 days after surgery. How your body responds to surgery will depend on several factors. The type of surgery you have, your natural pain tolerance, and age can all affect how you feel post-operatively. Each person recovers from surgery in their own way, and someone who has the same procedure might have a completely different experience of pain. You can expect to feel pain around your surgery site, but you might also feel:

- **Muscle pain:** You may feel pain in muscles throughout your body. It can be from the surgery itself, but many people clench their muscles without thinking about it (unconsciously) when they feel pain or stress after surgery.
- **Throat pain:** Your throat may feel sore or scratchy, especially if you were intubated.
- **Movement pain:** Sitting up, walking, and coughing are all important after surgery, but they may cause increased pain.

Pain can be mild, moderate, or severe, affecting your ability to sleep, rest, or concentrate. It can cause a variety of different feelings and may be characterized as sharp, stabbing, throbbing, aching, or burning.

How can I plan to manage pain after surgery?

Everyone feels some pain after surgery. It doesn't matter whether you're having a planned procedure or emergency trauma surgery. Managing that pain is an important part of the healing process.

Your surgeon will suggest a combination of pain management techniques to help keep you comfortable and safe after surgery. For most people, that includes at least one kind of medication combined with therapeutic modalities.

What is the best pain medication for after surgery?

There's no single medication that's best for everyone. Your body, health, and post-surgery healing process are unique. A good option for you may not work for someone else; therefore, it is important to notify your physician's office of any questions or concerns you have regarding your prescribed regimen.

There are several kinds of pain medications your surgeon may give you after surgery. You may receive IV (intravenous) medications if you're staying in the hospital, but most medications are pills that you'll take by mouth (orally).

Some of the most common post-surgery pain meds include:

Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)

NSAIDs relieve pain and reduce inflammation. Your surgeon may suggest over-the-counter or prescription-strength NSAIDs such as:

- Ibuprofen (Motrin, Advil)
- Naproxen (Aleve)
- Celecoxib (Celebrex)
- Indomethacin (Indocin)
- Ketorolac (Toradol)

Opioids

Opioids are prescription medications that are used for moderate to severe pain and should be taken as directed, in the lowest effective dose, for the shortest possible time. They bind to receptors in your brain and body to reduce pain signals.

Opioids are powerful medications and can be addictive. Physical dependence can occur with prolonged use, leading to withdrawal symptoms if stopped suddenly. Many healthcare providers are prescribing opioids less often or in smaller doses to reduce the risks of complications. There are several types of opioids, including:

- Hydrocodone (Vicodin, Norco)
- Oxycodone (OxyContin, Percocet)
- Codeine (Tylenol #3 or #4)
- Morphine (MS Contin, Kadian)
- Hydromorphone (Dilaudid)
- Tramadol (Ultram, Ultracet)
- Tapentadol (Nucynta)

Opioid medication should be utilized for severe, breakthrough pain that is not controlled by NSAIDs, or other analgesics, non-narcotic medications, and non-medication strategies. Even if you are using opioid medication, you should continue with a multi-modal approach. As your pain gets better, take fewer opioids at a time or discontinue their use completely.

Do not use opioids at the same time as alcohol, benzodiazepines, muscle relaxers, sleep aides, or other medications that can cause drowsiness.

If you are pregnant or planning to become pregnant, using opioid medications can cause harm to the fetus and should be avoided.

Non-opioid analgesic medications

Some medications can block pain-sensing neurons from reaching your brain while bypassing the receptors associated with addiction.

- Suzetrigine (Journavx)

Adjunct medications & other analgesics

Your surgeon may recommend over-the-counter (OTC) or prescription medications that can supplement your current opioid regimen by treating muscle spasm and inflammation to reduce your pain.

- Acetaminophen (Tylenol)
- Muscle Relaxants: Methocarbamol (Robaxin) or Cyclobenzaprine (Flexeril)
- THC-Free Clinical CBD products

Numbing Medication (Nerve Blocks)

Your surgeon may inject into the surgical site or into a nearby peripheral nerve to provide prolonged pain relief after surgery. This may cause temporary numbness and will reduce the need for opioids following a procedure.

- Exparel
- Bupivacaine
- Lidocaine
- Epidurals

What are the benefits of pain medications after surgery?

Reducing how much pain you feel is the biggest benefit of taking pain medication after a surgery. Your body heals faster when you're not in pain. Reducing your pain can actually help speed up your recovery.

Managing pain can also help reduce the risk of complications after surgery. If the pain is well-managed, it will be easier for you to walk, move, or breathe deeply. This can reduce your risk of pneumonia, blood clots, and other common post-op complications.

What are the risks of post-surgery pain meds?

All medications can cause side effects. Some of the most common side effects of pain medications can include:

- Nausea and vomiting
- Dizziness
- Drowsiness
- Itching
- Internal bleeding
- Liver or kidney damage
- Constipation and bowel obstruction
- Slowed breathing
- Impaired motor skills, thinking, or judgment

Opioids can be habit-forming and can cause opioid use disorder. If you take too many at once (or too often), you can experience an opioid overdose, which can be fatal. This risk may be higher in individuals with a history of:

- Substance use disorder
- Mental illness
- Long-term (chronic) pain
- Sleep apnea or breathing problems

Notify your healthcare provider if you or anyone in your biological family has a history of substance use disorders.

Will pain medication interact with my other medications?

Combining opioids with benzodiazepines can substantially increase the possibility of adverse effects such as respiratory depression and accidental overdose. One should avoid benzodiazepines and opioids prescribed concurrently when possible. Each of these drug classes carries a black box warning. If it is medically necessary for you to have both, then coordination of care preoperatively with your prescribing providers is highly recommended to enhance safety.

What to do if an opioid overdose is suspected?

If you take too many opioid pills at once (or too often), you can experience an opioid overdose, which can be fatal. Call 911 or report to the nearest Emergency Room if an overdose is suspected.

Signs of an opioid overdose may include the following:

- Blue or purple fingernails and lips.
- Unresponsive to voice or touch.
- Pinpoint pupils (the center part of the eye is very small)
- Slow, irregular, or stopped breathing.
- Slow heartbeat or low blood pressure.
- Pale, clammy skin.

How to prevent an opioid overdose

Talk to your healthcare provider if you have any additional risk factors that will increase your risk for opioid overdose. If you currently have chronic respiratory disease, have any mental health diagnoses, are on benzodiazepines, or have small children in the home, then your healthcare provider may prescribe Narcan, which can quickly reverse an opioid overdose.

How soon will I feel better after starting pain medication?

How quickly a pain medication starts working can vary. Most medications should start reducing the pain within an hour or two.

How often can I take pain medication?

Your surgeon will give you specific instructions on how much medicine to take and how often it's safe for you to take it.

Taking medication on a regular schedule, especially for the first few days, can keep pain under control.

It is okay if you do not feel enough pain to need medicine as often as you're allowed to take it. If you aren't feeling pain, it's usually safe to skip a dose or to take as needed and at the next scheduled dose.

Ask your surgeon which pain management plan they think is best based on the surgery you had and the medications you're taking.

May I request additional pain medication?

Contact your surgeon if you feel like you're in more pain than you should be, as your dose may need to be adjusted.

Your surgeon can also adjust which type of pain medication you are using. Some medications (especially opioids) have a limited dose, but other adjunct medications may be recommended to help provide more adequate pain relief.

Never take more medication than your care team says is safe. You're much more likely to experience severe complications if you take too much pain medicine.

Where should I keep my pain medication?

Store opioids and any other medication in their original container, away from children and other people.

How can I dispose of unused pain medication?

Dispose of unused medication at a drug take-back site or by mixing it with coffee grounds or kitty litter in a sealed bag and throwing it in the trash.

Follow these steps:

1. Remove the drugs from their original containers and mix them with something undesirable, such as used coffee grounds, dirt, or cat litter. This makes the medicine less appealing to children and pets – and unrecognizable to someone who might intentionally go through the trash looking for drugs.
2. Put the mixture in something you can close (a resealable zipper storage bag, empty can, or other container) to prevent the drug from leaking or spilling out.
3. Throw the container in the trash at home.
4. Scratch out all your personal information on the empty medicine packaging to protect your identity and privacy. Throw the packaging away.

How can I control pain at home?

Most of your pain management will happen at home after you leave the hospital or surgery center. Taking your medications will be part of your pain management plan, but you may also want to consider the following:

- Relieve pain without medication. Heat or ice can be good ways to manage pain in between doses of medication. Additionally, gentle compression of the surgical site and elevation help alleviate swelling.
- Take pain medication before activity or at bedtime. You may want to take pain meds before you do movements, exercises, or other physical activities. Taking your medications right before bedtime can help you get to sleep more easily.
- Get enough rest. Sleep is extremely important to help your body heal.
- Make sure you're comfortable. Plan to move pillows, cushions, or other supportive devices into your bed or wherever you'll be spending lots of time throughout your day. You may need to adjust to sleeping or sitting in a different position than usual.

When should I see my healthcare provider?

If you have severe pain that does not improve with medication, or if you are unable to sleep due to pain, then you should contact your surgeon.

Call your surgeon or care team if you experience new or worsening symptoms like high fever (>102.5) or confusion, or if you notice any signs of complications to your surgical site, including:

- Excessive or new onset bleeding
- Leaking fluid, pus, or a foul odor
- Discoloration or redness on your skin