

Monkseaton Medical Centre & Bridge Medical: PAIN MANAGEMENT

Pain is an unpleasant sensation that we all experience. Everyone experiences pain differently and it affects people physically and emotionally. There are different types of pain:

- **Short-term pain (also known as acute pain)** can include things such as a broken leg, this pain acts as an alarm, telling us something is wrong. This pain can be helpful, e.g., with a broken leg, acute pain will make us rest until it heals.
- **Long-term pain (also known as chronic pain)** involves more ongoing problems, such as arthritis or back pain. Chronic pain often serves no purpose, the alarm is not needed, and it is just annoying.
- **Nerve pain** is often linked to conditions such as sciatica, or 'trapped nerves'. Nerve pain often presents as a 'shooting' type of pain, that can feel like electric shocks, burning, tingling or numbness.

Pain management is about making you feel better so you can carry out your daily activities like work or school. There are various treatments like medicines, therapies, and procedures, but not all of them work for everyone.

We have produced this leaflet to make you aware of options available for the management of pain. However, it is worth noting that **no medicine will 'kill' pain**. Generally, analgesics (or 'pain relief') will only improve pain slightly, in fact, pain relief usually takes away **no more than 30% of perceived pain**, this can vary from person to person.

Listed below are some common pain management methods, and their pros and cons. If you would be interested in using one of these options **short-term** for your pain, please contact the practice.

FOR GENERAL PAIN		
<u>Treatment option</u>	<u>Pros</u>	<u>Cons</u>
Simple methods: Heat or cold therapy, massage, stretching and exercise	- <u>Effective</u> for mild pain - No side-effects - You learn to manage your condition - Psychological benefits	- Can be time consuming
Paracetamol: For adults, 1 or 2, 500mg tablets up to every 4 hours, maximum of 8 tablets daily	- Effective for mild pain and fever - Rarely interferes with other medicines - Rarely causes side-effects - The only pain relief <u>suitable in pregnancy</u> - <u>Can be purchased 'over the counter'</u> from pharmacies and supermarkets - Can be used in combination with medicines such as ibuprofen or codeine	- Does not reduce swelling or inflammation
Non-steroidal anti-inflammatory drugs (NSAIDs): Ibuprofen: For adults, 200mg-400mg up to every 4-6 hours, maximum 3 times daily Naproxen: For adults, 250mg three times daily, or 500mg twice daily	- Effective for mild to moderate pain - Reduce swelling and inflammation if taken for 2-3 weeks - Come as oral tablets or topical gels - Ibuprofen <u>can be purchased</u> from pharmacies and supermarkets - Ibuprofen is one of the two safest and most effective NSAIDs available - Can be used in combination with paracetamol or medicines such as codeine	- <u>Not suitable to take alone if you have, or have had, stomach problems</u> (indigestion, heartburn, or ulcers) - you may want to speak to your GP about prescribing something to protect your stomach so that you can take a short course) - Should be avoided if you have liver or kidney problems - A small number (10-30%) of patients with asthma may get wheezy if they take NSAIDs, and may need to use their inhaler more - <u>Can interact with various medicines</u> , including 'blood thinners', some medicines for high-blood pressure and steroid tablets - <u>Should not be taken on an empty stomach</u> - Using for longer than 3 weeks has a risk of causing <u>kidney damage</u> - Should be stopped if you have an illness that makes you at risk of becoming dehydrated (e.g., vomiting and diarrhoea)

<p>Weak/moderate opioids (depending on dose used):</p> <p>Codeine: For adults, 15mg–60mg up to every 4–6 hours, maximum 4 times daily.</p> <p>Tramadol: For adults, 50mg–100mg up to every 4-6 hours, maximum 4 times daily.</p>	<ul style="list-style-type: none"> - Effective for moderate to severe pain - Suitable <u>short-term</u> for the relief of acute pain, when paracetamol is ineffective – for example after an accident or surgery - Can be used in combination with paracetamol, or medicines such as ibuprofen - Can be bought over the counter as co-codamol (paracetamol and codeine), licensed to be used for up to 3 days - Avoid effervescent (fizzy) tablets as these contain a lot of salt and can make heart failure and kidney problems worse 	<ul style="list-style-type: none"> - For short-term use only (long-term use often results in more side-effects than benefits) - Carry a risk of <u>addiction</u> - Carry a risk of <u>tolerance</u> – meaning the longer you take the, the less effective they become - <u>Multiple side-effects</u> including constipation, nausea and vomiting, drowsiness, confusion, decreased sex drive, sleep problems and weight gain - <u>Can impact ability to drive</u> or perform skilled tasks - Fatal in overdose - Can cause withdrawal symptoms if you stop taking them suddenly after long term use (also known as dependence) - Can interact with other medicines and alcohol (<u>effects of alcohol enhanced</u>) - Codeine and tramadol are controlled drugs and are available only on prescription
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Strong opioids: Examples include morphine, fentanyl and oxycodone, strong opioids are recommended for cancer pain or following surgery, they wouldn't typically be given for acute pain.

FOR NERVE PAIN

<u>Treatment</u>	<u>Pros</u>	<u>Cons</u>
<p>Amitriptyline: Initially 10mg taken in the evening, dose can be increased as needed, but doesn't usually exceed 30-40mg at night.</p> <p>Duloxetine: 30-60mg once or twice daily</p>	<ul style="list-style-type: none"> - <u>Effective for nerve pain</u> in approximately 25% of patients - No risk of addiction - Sedating effect can be useful if sleep is affected by pain - Often the nerve pain settles in 2-3 months - Duloxetine may benefit mood as well as pain 	<ul style="list-style-type: none"> - Effect isn't immediate, usually you will see some benefit if it is going to work in 4 weeks - Side-effects include dry mouth, blurred vision, constipation, difficulty peeing, drowsiness, nausea and vomiting, decreased sex drive, hangover type feeling in the mornings - <u>Can impact ability to drive</u> or perform skilled tasks - Fatal in overdose - Can cause dependence, resulting in <u>withdrawal symptoms</u> if you stop taking them suddenly after long term use - Can interact with certain medicines like antidepressants
<p>Gabapentin: Initially 100mg-300mg up to 3 times daily, dose is titrated over several weeks.</p> <p>Pregabalin: Initially 150mg daily in 2 – 3 divided doses; max 600mg daily in 2 – 3 divided doses.</p>	<ul style="list-style-type: none"> - <u>Effective for nerve pain</u> in approximately 30-40% of patients 	<ul style="list-style-type: none"> - Side effects include confusion, constipation, dizziness, drowsiness, headache, nausea and vomiting - Carry a <u>risk of dependence and addiction</u> - <u>Can impact ability to drive</u> or perform skilled tasks - <u>Should not be stopped suddenly</u> - Gabapentin and pregabalin are <u>controlled drugs</u>, meaning only 1 months' worth can be prescribed at a time

We would encourage you to purchase paracetamol and ibuprofen over the counter from pharmacies when needed, this is often low-cost and saves the NHS money. Local pharmacies offer a 'Pharmacy First Scheme', if you are entitled to free prescriptions, you may be entitled to paracetamol and ibuprofen free of charge from the pharmacy.