Emergency Department Discharge Advice

Health & care information you can trust

The Information Standard

Certified Member



You have been prescribed medication to help pain control. The medication may not cure the underlying problem, but should make it easier for you to manage with the pain.

Medication is not the only method of pain relief. Other methods can include:

massage of the affected area (especially for muscular pain)

Dorset County Hospital

NHS Foundation Trust

- splinting or supports (especially for broken bones or after a • dislocation)
- ice (especially if there is swelling from an injury)
- heat (especially for muscular pain)
- gentle exercise (can often be important in easing pain from • muscle spasms)
- relaxation or breathing exercises can sometimes help some • people to manage difficult pain

Choice of pain killers depends both on what the cause of your pain is, how severe it is and any drug sensitivities you may have. Pain perception varies widely between people, so often two people with the same underlying problem need different pain relief.

Often when pain builds up it can be difficult to get control of. Therefore, if a problem requiring pain relief is unlikely to get better rapidly it is usually recommended you take pain killers regularly, rather than waiting for the pain to become unbearable before taking them.

Different pain-killers work in different ways to reduce pain, and can be divided into classes of drugs (see below). Because they work in different ways, pain killers from different classes are often prescribed together to get best effect.

Pain relief may enable you to continue with your normal activities more easily than if you continued to have severe pain. However, it is highly unlikely you will aggravate an injury by doing too much because of pain killers masking the pain.

Specific medicines

All medications can have side effects. Below is a list of common pain killers, with their common uses and side effects.

Please turn over:

If you need this information in large print, easy read, on audiotape or in another language please call 0800 7838058 or email pals@dchft.nhs.uk

Itormatio

If you wish to obtain a list of the sources used to develop this information leaflet please call 0800 7838058 or e-mail patient.info@dchft.nhs.uk

Author: Nurse Practitioner Publication Date: 04/14 Review Date: 04/17

1

For a full list of side effects you should refer to the information leaflet enclosed with your medication. The medication box will have details of how much of each drug can be taken and how often.

Paracetamol

Paracetamol is useful in most types of pain. It works together with other pain relieving medication to achieve a better effect than either drug alone.

Side effects are very rare. However, paracetamol can be very toxic if taken above the recommended daily maximum doses, causing liver failure and death.

Anti-inflammatory medications – Ibuprofen, Diclofenac

Anti-inflammatories are usually most helpful in pain caused by an injury or inflammation.

Side effects can include nausea, vomiting, heartburn/reflux, peptic ulcer formation, aggravation of asthma, interactions with other medications especially aspirin or warfarin.

Opiate medications – Codeine, Tramadol, Oramorph

Opiate medications are used for moderate or severe pain, usually together with other pain medication.

Common side effects at the recommended dose include nausea, vomiting, constipation, dry mouth, mood changes and rashes. Long term use may lead to tolerance (reduced effectiveness) and dependence. Above the recommended doses respiratory problems, drowsiness, collapse or unconsciousness may occur. Occasionally confusion or hallucinations may occur, especially in older people.

Co-drugs – Co-dydramol, Co-codamol

Contains a mix of paracetamol and an opiate medication (dihydrocodeine or codeine).

Do not use co-drugs together with paracetamol unless recommended by a doctor or nurse because of the risk of paracetamol toxicity.