

Pain after an injury or surgery is common and should often be expected. There are many ways to manage and reduce this pain. This often does not include medications or may not exclusively include medication. Each patient, surgery and surgeon are unique, and the approach to management of pain is individual.

It is important to try to discuss your concerns and expectations regarding pain with your surgical team before and after surgery. They want to help you get better and have a good patient experience. Your patient experience includes understanding and treating your pain.

Here's what you may expect before surgery and how to manage your pain and medications after surgery. Again, the approach to pain management after injury or surgery is individualized, and this is general information. Your surgical team will have more specific recommendations for you. Before using any of the methods explored here, please discuss with your medical team if these pain management methods are appropriate for you. We advise good communication with your team to let them help you achieve the best outcome.

Surgery Day

As your surgery begins, your surgeon and anesthesia team may give you medications by mouth, IV, and/or injection. Giving you medication as the surgery progresses not only helps you to decrease pain during the surgery, but it also reduces your pain post-surgery. You may also receive medication in the recovery room after surgery, if needed. In some cases, you will receive prescription pain medication and instructions for its use to use at home in the days following your surgery. You may also receive instructions on using over-the-counter pain medications. It is important to follow these directions carefully, as many over-the-counter medications contain some of the same ingredients as prescription pain medications and using them together can result in a dangerous accidental overdose.

Post-Surgery Pain Management

While always important to follow your specific post-operative instructions, here are some different methods, outside of medication, that your team may recommend to reduce your pain:

- **Elevate:** Elevating the injured area so it is higher than your heart can reduce swelling and pain. Swelling can increase quickly by putting your hand at your side, and this can make your dressing feel tight. Often, the pain associated with swelling is difficult to control, so it is best to avoid this problem.
- **Take care of your dressing:** If your dressing/splint feels tight, and elevation for 10 minutes does not improve the tight sensation, contact your surgical team. It may be recommended that you unravel any tape or elastic wrap and loosen the outer bandage. If this does not help, you may be advised to tear, unravel, or cut the inner layers with blunt-tipped scissors. Make sure you are cutting on the opposite side of where your incision is located. When done, you will need to try to rebuild your dressing to keep your wound clean and covered. Before doing any of this, check with your medical team. They may want to be aware of the tight dressing and could have different instructions for loosening the dressing.
- **Keep moving:** If allowed by your surgeon, try to frequently move the fingers, wrist, elbow, and/or shoulder that are outside of the splint or cast. You can do this gently and slowly. This improves blood flow, which limits swelling and prevents bandages from feeling tight. It may be uncomfortable to move at first, but the discomfort will often improve with time and frequently improves with motion. Your surgeon will be more specific about what to move and what to rest.
- **Ice the area:** Icing the painful area will typically reduce swelling and inflammation and reduce pain. However, there may be certain procedures (such as surgery on arteries, skin grafts or flaps) where ice could be harmful, so consult your surgeon before using ice.
- **Heat the area:** If you are in the phase of care where you can remove your dressing or splint, you may be able to try heat. Heat increases blood flow to an area and can help with muscle spasms, muscle soreness and joint pain.
- **Avoid smoking:** Chemicals present in cigarettes can increase pain. Reducing or quitting smoking can improve your pain.
- **Consume vitamin C:** Consuming 500mg of vitamin C daily for 6 weeks may reduce pain after some injuries. However, it is ascorbic acid, which can upset your stomach if you have heartburn or gastritis.

Post-Surgery Medication Management

The pain-management methods listed above are often effective when used in combination with taking medications post-surgery. There are many different classes of medication that can help pain. Some can be purchased over the counter, and some require a prescription. All medicines can have some benefits and some adverse reactions/side effects. Your surgical team will balance these issues to

provide a plan for you. Some commonly prescribed medications can include:

- Tylenol (Acetaminophen)
- Aleve (Naprosyn/naproxen)
- Motrin/Advil (Ibuprofen)
- Celebrex (Celecoxib)
- Toradol (Ketorolac)

When taking medication, keep the following in mind:

- It may take 30-60 minutes for your body to absorb the medication after you take it by mouth, so be patient.
- Longer-acting medications used before bedtime may help you sleep better the first few nights after surgery.
- The first few nights post-surgery will generally be the toughest.
- Do not exceed the dose recommended by your physician or combine medications without consulting with your physician.

If you are unfamiliar with the medication, you can specify how much medication to take, how long, and how often.

Opioids

Opioids are a type of pain medication made from the poppy plant that is used to make opium and heroin. They can be effective in treating pain, but opioids should be used at a last resort, in limited amounts, and for a limited number of days. Use of these medications should only be done under the guidance of your doctor. When taking opioids, you are at risk of becoming dependent on the medicine, and they may become less effective over time.

Oxycodone and hydrocodone are two of the most commonly used and effective opioid “pain” pills. These pills are frequently combined with Tylenol (acetaminophen), but it must be done carefully. Be sure to consult your surgeon before doing so. Your surgeon will give you a customized plan for managing your pain based on your type of surgery, number of procedures, duration of surgery, etc. Keep in mind that many opioids are combined with Tylenol (acetaminophen) already in the pill, so take care to follow your prescribed directions and not to take more opioids or acetaminophen than prescribed. Overdoses of each of these medications can be dangerous and life-threatening.



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Understanding the side effects, how to properly dispose of any