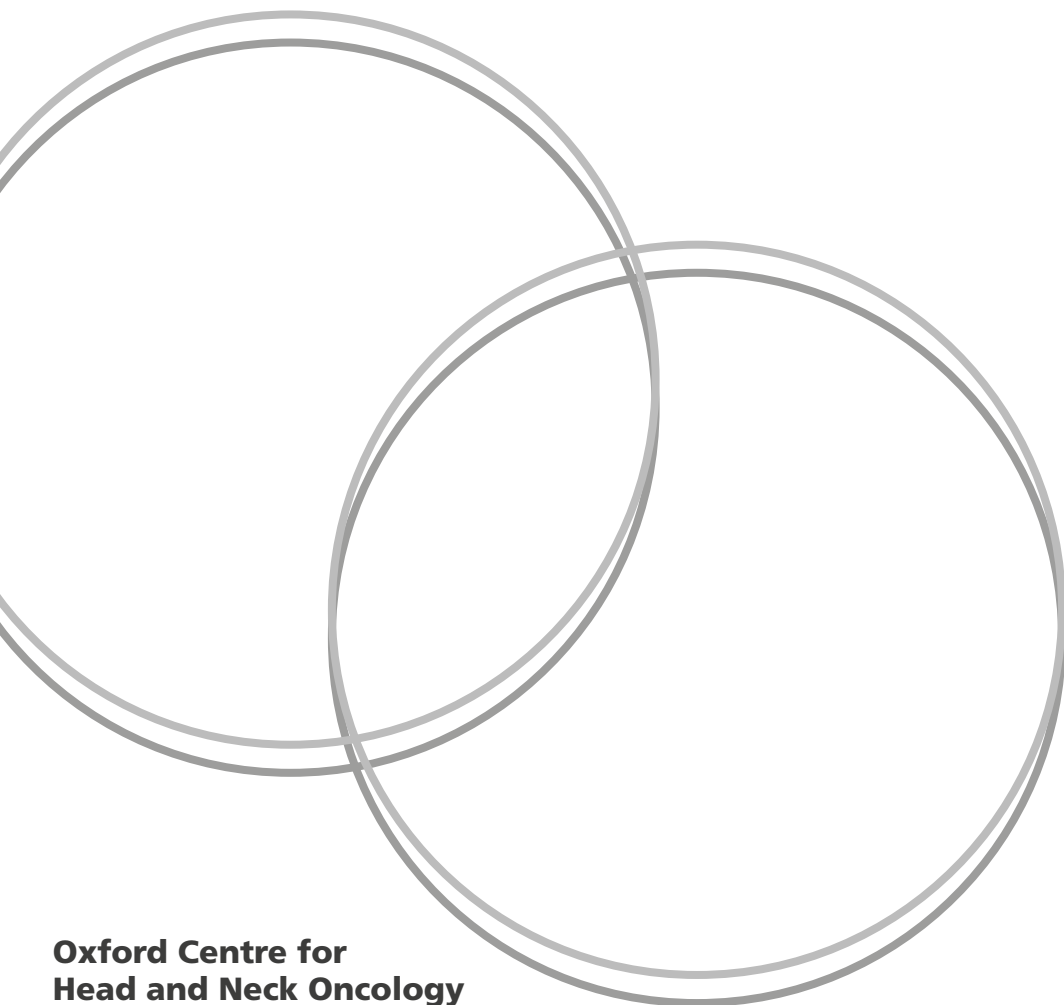




Oxford University Hospitals
NHS Foundation Trust

Pain Relief

Information for patients



Oxford Centre for
Head and Neck Oncology

Introduction

This booklet has been written to give you information about pain relief. It has been compiled by staff experienced in helping patients with pain relief and answers those questions most frequently asked by patients.

This information is only a guide; your health care team will give you more detailed information as you need it. We hope you and your family will find the information both reassuring and supportive.

If you have discomfort, soreness or pain, or are worried about getting symptoms in the future, it is important that you follow this advice to make sure you are as comfortable as possible and can continue your everyday activities.

Pain may last for a short period only, perhaps as a side effect of treatment such as radiotherapy or surgery. This will improve gradually after treatment is complete, but may take some weeks, particularly after radiotherapy. Suitable pain relief can be prescribed to help during these times.

Any pain relief medication needs to be taken at regular intervals during the day, and for at least 48 hours, before you can really say whether it has been effective or not.

Painkillers come in different forms, such as tablets, dissolvable tablets, liquids, patches and suppositories, so even if swallowing is difficult, we should be able to give you medication. Please discuss this with your health care team.

Your pain relief medication should be reviewed regularly as your needs change.

Am I going to be in pain?

Some people experience no pain, others may have a lot of pain during or after treatment. This will depend on your diagnosis, treatment and tolerance level to pain. Whatever pain you have, suitable medication will be prescribed for you and can be adjusted until you are comfortable. The most important thing is to take painkillers exactly as they have been prescribed. You should take them at regular intervals throughout the day, 30 minutes before eating or drinking (except ibuprofen or diclofenac, which need to be taken after food) and before doing any exercises that you have been advised to do. You may need a combination of medication to achieve the best pain relief. Your health care team will advise you on which medicines to take together.

Will I get addicted to the drugs?

No. People who are in pain and need medication for pain control do not become addicted to the drugs, even if high doses are needed. This is because the body uses the painkillers in the right way. It is important that, even when the pain has subsided, you take the right amount of pain relief to control your pain. When the pain reduces, or you no longer need the drugs, they should be reduced gradually. This is particularly important if you have been taking an opiate, such as liquid morphine sulphate. If you are unsure how to reduce your painkillers, please ask your health care team.

Will the drugs make me drowsy?

Some pain killers may make you drowsy, but the dose can be adjusted to prevent this happening, whilst still being effective against the pain. Being in pain is very stressful and tiring for your body. Sometimes when the painkillers are working and your pain is relieved your body relaxes and you sleep. This is perfectly normal and does not mean your painkillers are making you drowsy.

Is the cancer getting worse if I have a lot of pain?

No. The amount of pain you have is specific to you and will depend on the position of the cancer rather than on the size; more pain does not mean a worse or bigger tumour.

What else can I do to help?

It may be helpful to keep a 'pain diary'. Record the pain when you take your medication and at each mealtime. A score of zero would indicate no pain and a score of 10 would be unbearable pain.

The purpose of the pain diary is to see whether there is a pattern. If this is the case you can make adjustments to the timing of your medication to prevent pain from building up. The pain diary helps the health care team to make any adjustments to the type or dose of your medication. There are many different types of pain relief medication available and you may find one works better than another for you. Ask your health care team for examples of pain diaries if you would like one.

What are the common side-effects of painkillers?

Some painkillers, particularly opiates such as codeine, co-codamol or morphine, can cause you to become constipated. Others, such as anti-inflammatory medication like ibuprofen, can cause stomach pain and acid reflux. If you have any side-effects, please discuss them with your health care team as soon as possible.

What should I do if the pain gets worse in the evening, weekend or on a Bank Holiday?

In the first instance you should always contact your own GP or out of hours service and discuss the situation with the on-call GP. If you would like further support after speaking with your GP you can phone the department or ward that is currently treating you. Alternatively you can get immediate advice 24 hours a day from the NHS Advice Service by dialing 111 from your landline or mobile (freephone).

How do I get repeat prescriptions or help with the cost?

Once you have painkillers that work well for you, then your GP can issue a repeat prescription. It is worth noting that if you have a cancer diagnosis you are entitled to free prescriptions. Please see your GP if you don't have a prescription exemption card and they will give you the form to fill in to receive your card.

The specialists in pain and symptom control are the Palliative Care Team. You may wish to be seen by a member of this team or your Consultant may suggest it. This does not mean you require end of life care or that the treatment has not worked. It is aimed at making sure you receive the best help and advice you need to reduce your pain.

Questions or further information

Pain may be made worse by other worries or concerns you may have as this can make you stressed and tense. If so, or if you have any other questions, please talk to your health care team or the Head and Neck Cancer Specialist Nurses:

Head and Neck Cancer Specialist Nurses

Telephone: 01865 234 346

(Monday to Friday, 8.00am to 4.00pm)

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
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