

Managing Pain After Hand Surgery

If you ask patients what they want from their surgery, most often they will say the following:

1. I want the surgery to be successful.
2. I don't want any complications.
3. I don't want it to hurt.

We do our best to help you manage your pain. But it's normal to have some pain after surgery, even with the pain medicine. Your pain should be at a level that:

- You can stand
- Allows you to do some of your normal activities
- Allows you to be up and move around
- Doesn't prevent you from being able to sleep

Below is information to improve your overall experience.

Pain Medications Before Surgery

- Prior to coming into the hospital for surgery, please take:
 1. **Naproxen (Aleve ®) 220 mg** – a long-acting anti-inflammatory medication and not Ibuprofen (Advil ® or Motrin ®), which is short-acting

AND

 2. **Long-acting Acetaminophen (Tylenol ® Arthritis or Tylenol ® 8-hour) 1300mg (two tablets)**. Tylenol ® Extra-strength is not the same thing as Tylenol ® Arthritis.
- Take your medications with a small sip of water if you are having surgery in the **Main Operating Room**. If you eat or drink more, your surgery may be cancelled. **Please follow the fasting instructions provided to you.**
- If your surgery is in **Minor Surgery** you **may** be able to eat and drink normally, however again **please follow the fasting instructions provided to you.**

Depending on the type of surgery you have, you may have a nerve block to help manage your pain. It helps prevent pain for 6 to 36 hours after surgery. But you should start taking your pain medicine, as prescribed by your healthcare team, **before** the nerve block stops working.

Pain Medications After Surgery

- After surgery, please take:
 1. **Naproxen (Aleve ®) 220 mg, twice a day**

AND

 2. **Long-acting Acetaminophen (Tylenol ® Arthritis or Tylenol ® 8-hour) 1300mg (two tablets) three times a day**
- Take these pain medications whether you are hurting or not. Taking these medications keeps a baseline of pain medication in your blood, preventing pain before it occurs.
- Continue this for at least two days after surgery, and continue until you feel you do not need the pain medicines. We usually recommend use of pain medicines up to 5-7 days.
- Naproxen (Aleve ®) is a non-steroid, non-opioid, non-addicting, anti-inflammatory medication that significantly reduces swelling, inflammation, and pain. Taking this medication greatly decreases the need for addictive, opioid pain medication after surgery. **Do not take more than 440 mg in 12 hours or 660 mg in 24 hours.**

- Tylenol® Extra-strength is not the same as Tylenol® Arthritis or Tylenol® 8-hour. **Do not take more than 4000 mg of Tylenol® in 24 hours.**
- Naproxen (Aleve®) and Acetaminophen (Tylenol® Arthritis or Tylenol® 8-hour) do not interact and can be safely taken together.

If you have Moderate to Severe Pain even with taking scheduled Naproxen and Acetaminophen, you can take the following opioid medication:

- Hydromorphone 1 to 2 mg every 2 hours as needed
 - Hydromorphone 2 to 4 mg every 2 hours as needed
 - Morphine 5 to 10 mg every 2 hours as needed
 - Morphine 10 to 20 mg every 2 hours as needed
 - Oxycodone 2.5 to 5 mg every 2 hours as needed
 - Oxycodone 5 to 10 mg every 2 hours as needed
- Very few hand surgeries will require opioids.
 - Only use the opioid medication in the first 24-48hrs for pain not managed with Naproxen and Acetaminophen.
 - Try to take as little opioid pain medication as possible.
 - Please return all unused opioids to a pharmacy for safe disposal.

Information about Pain After Surgery

- Remember: Pain is part of the normal healing process after surgery.
- The pain will improve day-by-day.
- To get the surgery done we have cut through healthy tissue. Your body needs time to heal.
- The first few days are the worst. Things will continue to heal and improve the entire next year.
- If you're not sure about your pain level, check with your surgeon for reassurance and to rule out a rare problem.
- The evidence is strong: the best pain reliever is peace of mind. So check on any concerns, then settle in as your body makes its way through the healing process.
- Tingling, shooting sparks, electrical shocks, and other nerve pains are all normal after surgery and will gradually improve. Opioids do not relieve these sensations.
- There are 2 kinds of pain with any operation:
 1. The pain of the surgery which usually lasts 1-3 days, but may continue up to a week. Please take Naproxen and long-acting Acetaminophen for this pain.
 2. The pain of "Doctor, it only hurts when I move". Once you only have this pain, stop taking pain medications. Listen to your body and avoid movements that cause this pain. Your pain is your friend, indicating that you need to stop and give your body time to rest and heal.
- After nerve decompression surgery, for example carpal or cubital tunnel release, most of the pain should improve. If your numbness was there all the time before the surgery, you may not get all of your feeling back or it may take a long time (months to years) for all of the feeling to come back.

Getting comfortable

Try one or more of the following:

- Elevate the surgical area, above the level of the heart, while sitting and standing. Use multiple pillows to elevate your affected extremity while sleeping. This will help prevent excess swelling, throbbing, and pain.

- The night of surgery, your hand is “on strike” and does nothing if you have had a nerve block. You can’t do anything with your hand or let it down until all the freezing is gone and you are completely off pain medications, including long-acting Acetaminophen and Naproxen.
- Apply ice (bag of ice wrapped in a towel; 10 minutes on, 5 minutes off, repeat). Do not “baby” your affected area but do not do what hurts. If you try to do something and it hurts, don’t try it again for 2-3 days. Healing takes days and weeks, not hours. Your body is very clever and will tell you what you can and cannot do.
- Gently move your unaffected joints to prevent stiffness.

Keeping a Pain Diary

- It may help to keep a pain diary so that you know when you last took your pain medicine and how well it’s working. The pain diary is also a place to write in what side effects you’re having from the pain medicine.
- If you’re not having good pain relief or you’re having side effects, you can show your surgeon or family doctor your pain diary at the follow-up visit. They can use the information to change your treatment plan.
- An example of a Pain Diary is provided on the last page of this handout.

When should I get concerned?

- Pain makes us wonder if everything is ok.
- Problems after hand surgery are not common. Your surgeon can tell you what to look for.
- If you think you might have a problem, call or page your surgeon or a member of the team.
- Redness on or around your incision is normal. Redness about the width of your thumb is normal. It is your body’s inflammatory process for healing.
- Real infection is rare and has redness spreading beyond the incision and surgical area, with more and more pain in the incision instead of less and less pain. You will also experience fever, chills, and pus coming out of the wound (as opposed to a little clear, yellow, or red liquid or blood in the first 3 days which is normal).

Read your discharge instructions so you know when you need to call 911 or your surgeon’s office.

Learning more about managing pain

- To learn more about managing pain, pain medicine, and treating your pain, go to MyHealth.Alberta.ca and enter “pain” into the search box.
- There are other ways to manage pain without using pain medicine. These non-medicine therapies may help a lot with your pain after the surgery. To learn more about other ways to manage pain, go to MyHealth.Alberta.ca and enter “complementary medicine” into the search box.
- For 24/7 nurse advice and general health information, call Health Link at 811.

To learn more about pain expectations, management, and relief, you can view these videos:

<https://www.youtube.com/watch?v=Tt52qS5Zttk&feature=youtu.be>

<https://www.csahq.org/public-education/safe-opioid-use>

Non-Opioid Pain Relief

$$1 + 1 = 3$$

The combination of an extended release long-acting Acetaminophen (Tylenol® 8hr) combined with a long acting arthritis/pain medication like Naproxen (Aleve®) acts synergistically. It is like 1+1=3.



Same medication, different boxes

Extended release - 8 hours

Take 2 tablets every 8 hours

Do not exceed 6 tablets per day



PLUS



Take 1 tablet every 12 hours

Do not exceed 3 tablets per day

Safe Use, Storage, and Disposal of Prescription Opioid Medicines

Prescription drug abuse is a serious public health issue.
Opioids reduce pain for a short time, but can be dangerous if used improperly.

Safe Use

Improper use of pain medicine is a leading cause of accidental death.

- Read the label on the prescription and follow the directions for how to take it.
- Never take more than instructed.
- Never take somebody else's medicine.
- Never give or sell your medicine to someone else.
- Combining opioids with alcohol or other drugs increases the risk of death.
- Combining opioids with medicines used to calm anxiety can result in overdose.
- Using opioids for something other than pain (anxiety, sleep, fear of pain, to feel good) can create a harmful dependence/addiction.
- Unless your surgeon or doctor tells you to, do not take other pain medicines that have Acetaminophen/Tylenol; or other anti-inflammatories such as Aspirin/Bayer®/Bufferin®/Exedrin®/222®), Ibuprofen/Advil/Motrin, Arthrotec®, Ketorolac/Toradol®, and Diclofenac, Celecoxib/Celebrex®; or Gabapentin/Neurontin®.
- Call your surgeon's office during regular office hours if you have any questions about your pain medicine.

Safe Storage

Unused medicines in your home are at risk for inappropriate use.

- Pain relievers are a leading cause of serious poisoning of children and pets when they are left where others can get them.
- Hide or lock up opioid medications to avoid access by family, friends, or houseguests.
- Keep prescription medications in their original packaging so it is clear for whom the medications were prescribed and to save the directions for appropriate use.

Safe Disposal

You can return your unused and expired medications to any pharmacy in Canada any day of the year. If no medicine take-back program is available in your area, follow these simple steps to dispose of most medicines in the garbage:

- Mix medicines (do NOT crush tablets or capsules) with something unappealing, such as kitty litter or used coffee grounds;
- Place the mixture in a container such as a sealed plastic bag; and
- Throw the container in your household trash.
- Before throwing out your empty pill bottle or other empty medicine packaging, remember to scratch out all information on the label to make it unreadable.

This material is for information purposes only. It should not be used in place of medical advice, instruction, or treatment. If you have questions, talk with your doctor or appropriate healthcare provider.

