



Pain relief in adults

This leaflet provides information on acute pain relief in adults. You may wish to take pain relief following your visit to the Emergency Department. All medications have side effects and contraindications (specific situations in which a drug should not be used), so please let your doctor know of any allergies and always read the label on all medications.

What is pain?

Pain may be defined as an unpleasant sensory or emotional experience associated with actual or potential tissue damage. Controlling pain, whether acute or chronic, is a difficult task as pain is a very subjective phenomenon; what might be painful to one person may not be painful to another. The successful drug management of pain relies on selecting the appropriate drug at the correct dosage and balancing efficacy against adverse effects. For this reason, the World Health Organization introduced the concept of the 'analgesic ladder' (scale that describes an ascending order of drug therapy to match the degree of pain).

The analgesic ladder:

- **Step one**

Non-opioid analgesics (e.g. Aspirin, Paracetamol, non-steroidal anti-inflammatory drugs (e.g. Ibuprofen). If anticipation of pain can be abolished, it may not be necessary to step up to morphine derived drugs (opioid).

Paracetamol and Ibuprofen are available from chemists without a prescription. Follow the suggested dosage. You should not take Ibuprofen if you are allergic to Aspirin, suffer stomach ulcers or suffer asthma exacerbated by non-steroidal drugs such as Ibuprofen.

- **Step two**

Mild opioids (e.g. codeine): Codeine/ Dihydrocodeine/ Tramadol - effective for the relief of mild-to-moderate pain but is too constipating for long-term use. Your doctor may give you a combination of paracetamol and codeine, which can be very effective.

The main side-effects of all opioids are nausea, vomiting, constipation, drowsiness, and, in larger doses, shallow breathing and low blood pressure.

- **Step three**

Strong opioids: Useful for moderate-to-severe pain, particularly of organ origin. These are reserved for inpatient treatment and will not be prescribed for people leaving hospital unless discussed with a senior Emergency Department doctor.

References:

Bandolier: The Oxford Pain Internet Site

Guideline for the Management of Pain in Adults, British Association Emergency Medicine, 2004

Tell us your views

If you wish to discuss any aspect of your treatment and care, please speak to a senior member of staff or to the practitioner looking after you. The matrons are also available during normal working hours and they welcome your views.

Friends and Family Test

Whatever your experience you can give feedback by answering the Friends & Family test question – *‘Overall, how was your experience of our service?’* – by going online www.royalberkshire.nhs.uk/get-in-touch/friends-and-family-survey.htm.

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Please ask if you need this information in another language or format.

RVFT Emergency Department

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