

## **ADVICE ABOUT PAIN RELIEVING MEDICATION**

**PARACETAMOL** – If you take your paracetamol regularly - the pain relieving effect is much more powerful

Full dose = 2 tablets (each is 500mgs) every four hours – **maximum** of 8 in a 24 hour period.

- Paracetamol helps other pain relieving medication to work better.
- If you are thinking about taking it – look at your other medications to check it hasn't already been added
- You must be very careful not to exceed the recommended dose

**COCODAMOL** - paracetamol and codeine - mild to moderate general pain relief

- Next step up if pain is not responding to paracetamol.
- Codeine strengths vary 8mgs or 15mgs or 30 mgs

**Possible side effects:** constipation and less clear headed

If this is a problem for you – consider asking for a lower dose of codeine if you are on 30mgs.

**ANTI INFLAMMATORIES** – inflammation is part of the healing process after an injury. Let the body do its job and consider taking paracetamol for pain relief rather than reaching for an anti inflammatory.

If you are taking an anti inflammatory and have been for a while – does it help any of your symptoms?

**The next few medications can be helpful for nerve pain / symptoms – (burning, pins and needles, numbness, stabbing, electric shock, shooting)**

**AMITRIPTYLINE** - for nerve pain

- It was used for depression at very high doses but is now used routinely at a small dose for nerve pain.
- It has a sedative effect to help with sleep if the nerve pain is keeping you awake.
- The starting dose is usually 10mgs at night before bed.
- The sedative effect works quickly but the effect on the nerve pain takes 3 weeks to be fully effective.
- It should be taken every night as the effect builds up gradually.
- If your pain is not improving and depending on how you feel on Amitriptyline, the dose can be increased every 3 weeks by 10mgs up to 50mgs **under the guidance of your GP.**

**Possible side effects:** dry mouth and feeling a bit groggy in the morning. These effects often settle down after a while and are less of a nuisance if you take it earlier in the evening.

## **GABAPENTIN - for nerve pain**

- Tends to be considered next if Amitriptyline hasn't been helpful or not tolerated well.
- You do not have to stop taking Amitriptyline to start taking Gabapentin
- The starting dose is usually 300 mgs on day one in the morning.
- The next day add in 300mgs in the afternoon
- The next day add in 300mgs in the evening = 900mgs daily divided into 3 doses
- This can be done more slowly if necessary
- After 2/3 weeks – assess how the nerve pain is and how you are feeling on Gabapentin
- If the pain is no better the dose can be increased by adding in an extra 300mgs to each dose, slowly, one day at a time to reach 1800mgs divided into 3 daily doses. **Only after discussion with your GP.**

**Possible side effects:** can feel a bit tired until you get used to it.

## **PREGABALIN – for nerve pain**

- This medication is usually kept in reserve if Amitriptyline and Gabapentin have not been helpful.
- You do not have to stop taking Amitriptyline to take Pregabalin
- You **do** have to wean down slowly on Gabapentin and be off it for two weeks before starting Pregabalin.
- The starting dose is 75mgs twice a day for 1 week
- If symptoms are no better after a week the next increase is 150mgs twice a day.
- If symptoms are no better after a further week– the next increase is 300mgs twice a day.
- Any increase should take place after discussion with your GP / prescriber

## **TRAMADOL - good for moderate to strong pain and for nerve pain but for short term use only.**

**Possible side effect** - sickness. Difficult to continue with Tramadol if this is a problem.

**This information is to help you understand more about how your medication works best.** Nerve pain in particular can be long lasting and stubborn to settle. Some of the nerve medications above may help.

**Taking extra medication above the recommended dose will harm you.** If you want to stop any of your pain relieving medication – take medical advice and do it slowly to give your body time to adjust.

**Finally – pain relieving drugs work better when you add good self management to your daily routine.** Endorphins are the body's own pain relieving hormones and anything which boosts your well being will release more endorphins into your body.