

Other ways to manage pain

Understand your condition:

Increase your knowledge about pain and its management.

Keep active and moving: Gentle home exercise routine or classes with Fife Sports and Leisure Trust.

Self-management: Hot or cold, TENS machines and cushions may help with your pain if you use them regularly.

Flare-up plan: Have a plan to deal with bad days or setbacks.

Set realistic goals: Goals that are important to you. Take small steps.

Relaxation: Try different methods, set aside time each day.

Manage thinking and emotions: Understand how stress and anxiety affect your pain

Communication: It's important to talk and catch up with friends and family.

Get involved: Find local support groups.

Improve your sleep: Pain can affect sleep and poor sleep can worsen pain.

Diet and lifestyle factors: Aim for a balanced diet, healthy weight and good hydration.

Activity management/pacing:

Look at what you do, begin to prioritise, plan and pace yourself.

Remember

- If your medicines make you drowsy, do not drive or operate machinery.
- Never take more than the prescribed dose.
- Return out-of-date or unwanted medicines to your local pharmacy.
- Do not share or take other people's pain medicines.
- Store medicines safely out of the reach of children.
- Discuss any medication concerns with your doctor, nurse or pharmacist.

For more information on pain management, scan the QR code or visit nhsfife.org/pain-talking



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Pain talking

Pain management and medicines

This leaflet explains pain management, including types of pain, pain reliever medicines, alternative pain management methods and potential risks.



Fife Health & Social Care Partnership



Acute pain is short-term pain caused by injury, illness, or surgery. It usually improves over time. Chronic pain, also known as persistent pain, lasts more than three months.

After 3–6 months, the body has usually healed as much as it is going to. Pain can, however, continue even when there is no identifiable cause or after the original issue is resolved. This is because of the complex pain processing system.

Types of pain reliever medicines

Non Opioid: Paracetamol.

Anti-Inflammatory: Ibuprofen, naproxen, diclofenac.

Opioid: Codeine, co-codamol, dihydrocodeine, tramadol, morphine, oxycodone and fentanyl.

Other types of medicines may be prescribed depending on the type of pain. These include antidepressants or gabapentinoids (gabapentin or pregabalin). Information given in this leaflet about opioid medicines is similar for gabapentinoids.

Medicines are often not very effective for chronic pain. Therefore, it is beneficial to use other ways of managing pain too.

On average, medicines can reduce pain by about a third, but not all pain is helped by medicines. The aim is to give you a better quality of life.

Medicines can cause side effects and other problems. It is important to discuss your medicines with a healthcare professional to assess their safety and effectiveness.

If medicines are not helping or causing you problems, it is better to reduce and stop them.

Speak to your GP or pharmacist for advice before making any changes to your pain medicines.

Opioid medicines

Opioid medications have not been shown to be helpful to manage long-term pain and can cause serious side effects and long-term risks.

It is best not to take opioid medicines for long-term use.

Side effects

- Feeling sick
- Constipation
- Dizziness
- Tiredness
- Increased risk of falls
- Dry mouth

Other problems

- Difficulty breathing
- Low mood
- Reduced sex drive
- Impotence
- Weight gain
- Problems sleeping
- Increased risk of infections
- Increased risk of broken bones
- Poor concentration or memory

Other longer-term risks

Tolerance and dependency can develop when opioid medicines are taken regularly. Over time, the body gets used to them and they can stop helping manage pain. Withdrawal effects may occur if they are stopped suddenly.

There is also the risk of addiction with opioid medicines.

Opioid medicines can also affect the body's immune and endocrine systems.