

Information for patients about Patient Controlled Analgesia (PCA) for adult or teenage inpatients

For a translation of this leaflet or for
accessing this information
in another format:



Please contact (PALS) the
Patient Advice and Liaison Service on:

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Introduction

This leaflet describes what happens when you have Patient Controlled Analgesia (PCA), together with any side effects and complications that may occur.

PCA is a method of delivering pain-relieving drugs intravenously, by an infusion pump. Patients can then use the device when they need it. It may be used for patients who have had surgery and/or are in severe pain. The anaesthetist and pain specialist nurses will help you to decide if PCA is appropriate for you.

Intended benefits

- It helps patients to take control of their pain
- It works quickly
- It is safe and effective
- It avoids delays in waiting for pain relief

Possible side-effects

- It may make you feel drowsy
- It may make you feel sick
- You may have some itching

What you can expect, whilst your PCA is in progress?

A small amount of a strong painkiller will be given into your vein when you activate the device. The device is activated by pressing the green button on the handset. It is only by pressing the button yourself that you will receive any of the drug. The pump will then only deliver a certain amount of drug over a certain period of time. If you are unsure on how to use the equipment, please do ask the nursing staff and they will be able to help you.

Patients are normally advised to press their button when they have got a moderate pain and when they need to move or cough. Pain is much better managed if it is dealt with sooner rather than later.

The nursing and medical staff will ask you to describe your pain in words, which they will then convert to a score. Please be truthful and tell them about how much or little you hurt. If you are in pain, they will look to see what other pain medication you are having and decide if you need anything else. They will also assess how you are managing with your PCA, and should be able to treat any side effects such as nausea, itching or constipation.

The nursing staff will regularly check that the pump is running safely and that there are no problems. These checks may seem a bit annoying, but the staff need to make sure you are safe.

If you have any concerns about your PCA, it is important that you discuss these with the staff looking after you.

Drugs you may receive alongside your PCA

The nursing and medical staff will advise you that regular painkillers such as paracetamol with your PCA will help you to get up and about more easily. This combination will also help to reduce your need for the PCA. If you are feeling sick, you may also be given drugs to help. Please discuss with your nurse any side effects that may be worrying you.

Alternatives to PCA

There are other methods of pain relief and these should be discussed with you by the medical/nursing staff if appropriate. You may be able to take painkillers by mouth, and if unable you may be given intramuscular (IM) injections 'into a muscle in your leg or buttock, and /or suppositories (PR) into your back passage. You may also require painkillers by intravenous (IV) injection.

Every effort should be made to ensure your comfort

Pain management teams

Like most hospitals, we have a team of nurses and anaesthetists who specialise in pain management.

If you have any questions about your pain management which the ward staff are unable to answer, then please ask to see the Pain Team.

What can you do to help yourself?

- The nursing and medical staff will assess your pain by asking you to describe it, please answer honestly. It is important that you are comfortable at rest, and are able to move or cough.
- **Please remember that it may not be possible to take away all your pain.**
- If you are in pain tell a nurse immediately so that action can be taken sooner rather than later.
- We recommend that if there is anything you know of which helps you with your pain, such as a special pillow, you may bring it into hospital with you. It is advisable to ensure that this item has your name on it.
- Please do not take painkillers that have not been given to you by the nurse. It is vitally important that the nursing and medical staff know exactly what medication you are taking. All medicines must be kept in a secure locked cabinet whilst you are in hospital.
- We strongly recommend that you take all the painkillers prescribed for you. They work best if taken regularly.
- Additional pain relief will usually be prescribed for you alongside your regular ones. Please ask your nurse for this extra pain relief, if you need them.
- If you are worried or troubled by side effects such as nausea, constipation or itching please tell your nurse so that action can be taken.

After discharge from hospital

If you are still requiring painkillers when you are fit to leave hospital, you will be given a supply to take with you. These drugs are known as 'TTOs'. If you need more painkillers when these run out, your GP should be happy to prescribe them and advise you on when to stop taking them.

Any Questions?

We have written this information sheet to make your admission and care as smooth as possible. However, it does not cover every aspect of your care and the staff will always be happy to answer any other questions or points of concern.

If you think of any questions about your pain that you wish to discuss with your anaesthetist, nurse, medical team or the Pain Service, please record them below (to ensure you do not forget them)

Sources of further information:

The information in this leaflet was based on that in the RCOA leaflet 'Anaesthesia explained' and can be obtained from:

Royal College of Anaesthetists
48-49 Russell Square, London WC1B 4JY.
Phone: + 44 20 7813 1900 Fax: + 44 20 7813 1876
E-mail: info@rcoa.ac.uk Website: www.rcoa.ac.uk

- British Pain Society: www.britishpainsociety.org.uk

If any problems arise with your pain relief after you have gone home please contact the number on your discharge information or your GP.

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