

**ACUTE PAIN MANAGEMENT IN A UK DISTRICT GENERAL HOSPITAL**  
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Acute pain is commonly associated with recent surgery, injury and some disease states, such as myocardial infarction and acute pancreatitis. Poor pain relief is a common cause of complaint. The adverse effects of unrelieved acute pain can be psychological, physiological and socio-economic. Chronic pain services have for many years used a multidisciplinary, inter-professional approach. Adoption of this approach was recommended in the UK in the 1990s, following the Report on Pain after Surgery, and has been adopted by acute pain services.

In the Antrim Area Hospital, the acute pain service was set up in 2004, and the pain team is involved in the management of pain in surgical and medical patients, including children. Appropriate guidelines and protocols are widely disseminated and readily available in all clinical areas. Pain and its relief are assessed and documented on a regular basis. PCA's using morphine, have been the mainstay of pain control after major surgery. Intrathecal opiates are also used, predominantly in maternity patients. Epidural analgesia was limited to labouring patients, and post op patients in a high dependency unit. As pressures of high dependency beds led to epidural infusions not being offered or discontinued prematurely, in June 2006 a ward based post operative epidural service was commenced.

Where possible, regional anaesthesia, paracetamol/ NSAID's are used, as a component of a multimodal analgesic regime. These include spinal/ epidural, ilioinguinal, caudal, penile, paravertebral, and transverse abdominis plane (TAP) blocks. Intravenous paracetamol use has significantly increased, following guidelines for its use in wards, by nursing staff. Dexamethasone is used in select group of patients, for antiemetic and analgesic effect.

PCA's have proved popular with patients, who appreciate their being given control and access to self-administered rapidly acting pain relief. The current system with pumps and intravenous access is however not without its problems, and recently our hospital had started trialling the new self contained transdermal PCA fentanyl delivery system (Ionsys). Initial feedback from patients and ward staff has been encouraging. Unfortunately at the time of this writing, the device has been temporarily withdrawn by the company from the market.