

Echelle Visuelle Analogique (EVA)

Pas de
douleur

Pire
douleur
imaginable

General Management

Are you in pain?
Let's work
together then!



Are you in pain?

Are you worried about suffering after surgery or an examination?

Is someone close to you affected by this problem?

This leaflet is meant to inform you on how we manage pain here, and invites your comments. Do not wait to talk about your pain.

Pain, useful or useless?

Pain is mostly an alarm: it lets us recognize when we are ill or hurt. If pain persists, though, it becomes pointless or even harmful. It delays recovery and disrupts every aspect of our life.

ACUTE PAIN

- Useful because it is a danger signal
- Temporary physical, psychological, social and professional effects

DOLORE CRONICO

- Pointless, even harmful
- Persistent physical, psychological, social and professional effects
- Lasts more than three to six months

Adequate acute pain management reduces the risk of developing chronic pain.

Pain relief involves us all

Patients and care providers need to work together against pain. You are the expert of your own symptoms and only you can describe your pain. We have a number of ways of managing pain (see page 4).

DON'T WAIT TO SAY YOU'RE IN PAIN, HOWEVER SLIGHT IT MAY BE. THIS WILL HELP US ANTICIPATE AND ADAPT YOUR TREATMENT AS BEST AS WE CAN.

Tell us about your pain

Everyone deals with pain in their own way

How people perceive pain, and how pain manifests itself, varies from one person to another. Memories of past suffering and emotions, like fear, anger or sadness also have an effect.

On a scale of 0 to 10, how intense is your pain?

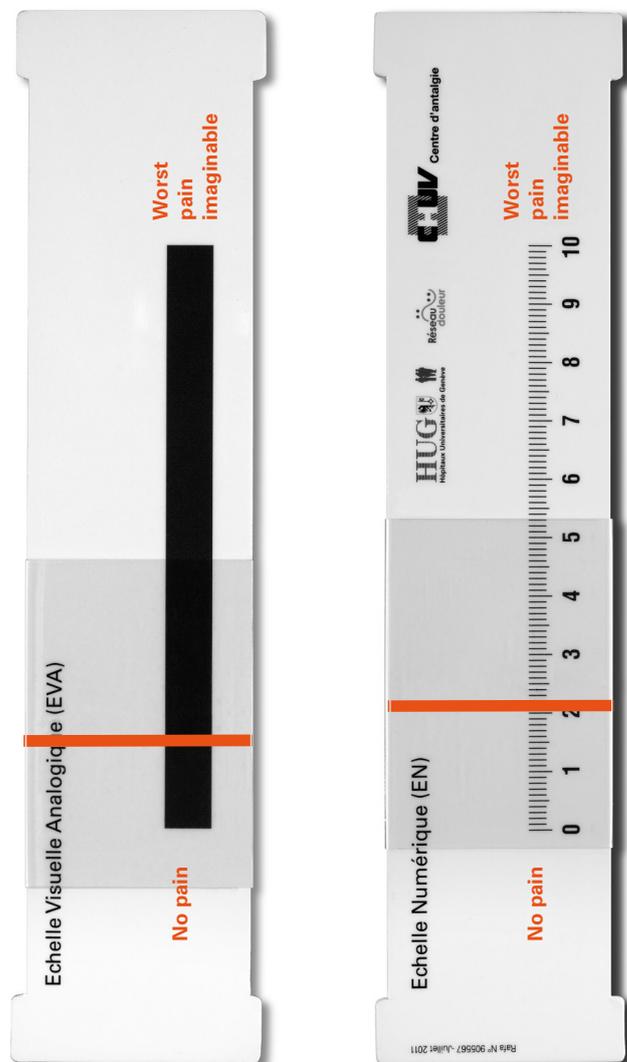
You will be often asked this question so we can adjust your treatment. We will assess your pain systematically and repeatedly – just like we take your temperature and measure your blood pressure. You can tell us how much it hurts on a scale of 0 to 10.

How can you help the healthcare team to relieve your pain?

By telling us what you feel, you are helping us tailor your care to you. This information is then written in your file. It ensures that the various professionals involved are more aware of how you are doing.

What can be done if a patient is unable to communicate?

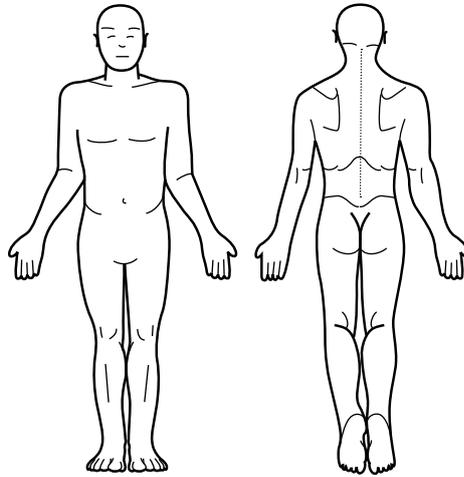
Other tools, such as appropriate observation checklists, are available to assess young children, those in a coma or those with serious impediments to communication.



How to talk about your pain with the caregivers?

Where is it painful?

(Indicate the painful areas)



When did the pain start?

How does the pain feel?

How strong is the pain?

(circle the corresponding number)

What are the situations that influence the intensity of the pain?

What aspects of my life are affected by the pain?

Which treatment(s) have I already tried?

Date:

- Pulsating
- Sparks
- Stabbing pain
- Gripping pain
- Other:
- Tingling
- Worrying
- Wearing
- Burning

No pain 0 1 2 3 4 5 6 7 8 9 10 Worst pain imaginable

- | | |
|-------------------------------------|------------------------------------|
| Situations that increase it: | Situations that reduce it: |
| <input type="radio"/> Position | <input type="radio"/> Position |
| <input type="radio"/> Movement | <input type="radio"/> Movement |
| <input type="radio"/> Stress | <input type="radio"/> Stress |
| <input type="radio"/> Cold | <input type="radio"/> Cold |
| <input type="radio"/> Heat | <input type="radio"/> Heat |
| <input type="radio"/> Resting | <input type="radio"/> Resting |
| <input type="radio"/> Other: | <input type="radio"/> Other: |

- Sleep
- Relations with friends and family
- Morale
- Work
- Other:

Medicinal:

Non-medicinal (physiotherapy, relaxation, hypnosis, etc.):

My own "tricks":

Other:

Preventing pain

Limiting pain in examination/treatment

Being examined (blood test, biopsy, particular positioning, etc.) or having scheduled treatment (bandaging, insertion of a venous or urinary catheter, etc.) can be painful. This is where prevention comes in.

Please don't hesitate to ask us anything about what your examination or treatment involves and how long it will take, including preventive treatment options.

Don't hesitate to tell us about what happened to you in the past, your concerns or your suggestions for improving your comfort.

What about post-operative pain?

There are many ways nowadays to manage post-operative pain. Our anesthetic and surgical care teams start to treat you against pain when you are first given your anesthetic. They then adjust it constantly while you are here.

And the pain that stems from an illness?

If your back hurts or you've broken a bone, or you have an infection or cancer: most illnesses can be painful. We will treat what's causing it as far as we can. But even if we still don't know what's causing your pain, we'll still deal with it.

TRUE OR FALSE?

Morphine is used only at a very advanced stage of illness.

FALSE

This drug is extremely useful for the treatment of many kinds of pain, especially after an operation.

DID YOU KNOW

Studies show that effective pain management reduces postsurgical complications and helps recovery. Effective treatment must allow you to stand up, move about and breathe as comfortably as possible.

Treating pain

Tailored to suit you

Most pain is relieved satisfactorily by combining:

- drugs
- physiotherapy, massages, application of heat/cold
- techniques to deaden or stimulate the nerves
- relaxation, hypnosis
- psychotherapy

Numerous drugs exist that are capable of efficiently relieving the pain (paracetamol, anti-inflammatory drugs, opiates, etc.). The treatment depends on the cause of the pain, how bad it is and what kind of pain it is, and should take into account any previous history.

What can you do?

By participating actively in your care, you can help to relieve your pain:

- by reporting any change to the level or type of pain
- by taking treatment when you are instructed to
- by evaluating how effective treatment is, and what side effects it has
- by asking us to increase the dose if need be
- by doing relaxation exercises
- by trying to take your mind off the pain, such as with music, television, reading, games, etc.

TRUE OR FALSE?

You should wait as long as possible before taking pain killers.

FALSE

As soon as you feel pain, you should not wait. Treatment is more effective if it is taken before painful symptoms set in.

DON'T LET PAIN SET IN: TELL THE NURSING STAFF AS SOON AS YOU START TO FEEL PAIN.

