

Managing Pain After Heart Surgery

What to expect and self-care

This handout explains what to expect after heart surgery, and how to work with your healthcare team to manage your pain.

Will I have pain after my heart surgery?

You will have some pain after your surgery. Pain is your body's natural response to surgery. But, keeping your pain under control is an important part of your recovery.

You and your care team will work together to manage your pain. We want you to be able to do the activities that will help you progress after surgery.



What can I expect?

- Your care team will ask you to rate and describe your pain many times. Each person has a unique response to pain medicine, so we want to know what you are feeling.
- Our goal is to reduce your pain so that you can:
 - Cough, breathe deeply, and sit up in a chair for all of your meals
 - Work with physical and occupational therapists
 - Walk 3 times a day with help from hospital staff
- You may still have some pain even after taking pain medicine. This is normal.
- Your nurse will teach you about the different pain medicines you are being given. We will work with you to create a plan for pain control that will help you progress during your hospital stay and when you go home.

Talk with a member of your care team if you have questions about managing your pain after heart surgery.

What causes pain after surgery?

- **Surgical incision:** Your skin, muscle tissue, and even bones may be handled during surgery. They can become inflamed and tender, and this can cause pain.
- **Chest tube site:** A tube is inserted into the space around your heart or into the space between your lung and chest wall. This tube drains blood and fluid from your chest after surgery. This can be irritating to the tissue inside your body and where the tubes enter your body.
- **Chest tube removal:** When you no longer need the chest tubes, your care team will remove them. The same tissue that was irritated when the tube was in place can also feel painful when the tube is removed. Some tubes are held in place with a stitch (*suture*), which can also cause pain when we pull it tight to help close the opening after the tube is removed.
- **Other drains:** Sometimes a smaller tube is used instead of a chest tube. These can cause pain for the same reasons chest tubes do.
- **Coughing and deep breathing:** When you take a deep breath, cough, or laugh, the pressure inside your chest increases. This can irritate the tissue involved in surgery and be painful. This is a normal part of recovering from surgery.

How can I help in my recovery?

We want you to be involved in your own recovery. Talking with your care team about your symptoms is the most important part of your recovery plan.

It is very important that you tell us about your level of pain. You know best what you are feeling, and we want to hear about it.

While you are in the hospital:

- **Partner with your nurse.** Talk with your nurse about how you are feeling. This is your best tool for managing your pain.
- **Work with your physical and occupational therapists.** Learn how to protect your sternal incision so that it heals.
- **Read the white board.** There is a white board in your room. It will list your pain medicines and when you can take them.
- **Learn about your pain medicines.** You will be given both:
 - Nonprescription (over-the-counter) pain medicine such as acetaminophen (Tylenol)
 - Prescription pain medicine such as muscle relaxers or opioids

- **Use ice and heat.** These simple treatments can be very helpful in reducing your pain.
- **Use imagery, massage, prayer, music, and aromatherapy.** Many people find their regular relaxation methods to be very helpful in managing pain after surgery.
- **Increase your activity:** While it may seem strange, being more active often decreases pain.

Why do I need to get out of bed?

Getting out of bed and moving around helps:

- **Prevent blood clots.** When you are not moving, blood can pool in your legs and other areas. This can cause a blood clot to form, which can be dangerous if it travels to other areas of your body (your lungs, heart, or brain, etc.). By getting out of bed, you help move blood from your legs, preventing clots from forming.
- **Prevent bedsores (pressure ulcers):** Staying in one position too long can damage your skin and cause bedsores. Sitting in a chair and walking helps reduce your risk of these skin problems.
- **Get rid of extra body fluid.** When you are out of bed, fluids that gather in your body during and after surgery are able to move out of your body. This helps prevent lung infection (pneumonia).
- **Reduce pain:** Staying in one position too long can make your muscles stiff and sore. Getting out of bed and sitting in a chair or walking short distances helps keep your muscles active and reduces pain.

Are there side effects from the pain medicine?

Tell your nurse if you have any of these side effects:

- Nausea
- Constipation
- Drowsiness

We can treat these side effects with extra medicines. Or, we may lower your dose of pain medicine.

What happens when I leave the hospital?

When you leave the hospital, keep taking your medicines as prescribed. Also use ice, heat, and relaxation methods to help manage your pain.

You will need less pain medicine as you recover. Your care team may prescribe opioid pain medicine for you to take at home. Your nurse will

talk with you during your hospital stay about how to reduce (taper) your dose of prescription pain medicine at home.

Tapering Your Dose of Opioids

Plan to decrease your pain medicine by either:

- Increasing the time between doses (for example, wait 5 hours instead of 4 hours between doses)
- Or, lowering the dose (for example, take 5 mg instead of 10 mg)

Try these tapering methods one at a time, not both at once. When your pain is well controlled for 1 to 2 days using one method, add the other method.

After about 1 to 2 weeks, you should no longer need the opioids for pain control. If you are having more pain or it is not easing after 2 weeks, please call one of these resources:

- Regional Heart Center, 206.598.4300
- Your cardiac surgery clinic nurse

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

5-Northeast: 206.598.4500

Regional Heart Center:
206.598.4300