



疑问？

我们很重视您的疑问。当您有疑问或顾虑时，请致电您的医生或医护人员。华大医疗中心的工作人员也可随时提供协助

206-598-_____

206-598-_____

其他资讯请看华大医疗中心电视第三台：
“如何止痛”

增进与您医护人员沟通的方法

讨论下列事项：

1. 将会发生什么情况？
 - 此病症或手术后会很痛吗？
 - 会痛多久？
2. 讨论控制疼痛的方法。
 - 告知过去止痛的有效方法。
 - 告知您服药及饮酒的情况。或许需要调整药的剂量。
 - 讨论您对止痛药的顾虑（如担心会上瘾）。
 - 提问有关药物的各种副作用
3. 熟悉疼痛指标卡（请参看附註：“请告诉我们您的疼痛”）。
4. 当疼痛一开始时即索取止痛药。止痛无效或发生新的疼痛时务必告诉医护人员。
5. 请亲友参与您的止痛计划。



病人教材

护理服务中心

如何止痛

病患手册

大多数的疼痛均可以药物及其他治疗法控制。此册子为患者及其家人提供止痛的咨询及如何与您的医护人员沟通使我们为您提供对您最有效的方法。

患者的权利及责任

关于我的疼痛我有下列权利：

- 照顾我的医护人员必须认同。
- 定期检查。
- 尽速解决。

我的责任：

- 咨询有关止痛法的选择。
- 形容我的痛及痛的强度。
- 疼痛在开始时即要求止痛药。
- 报告这些药物或治疗方法是否有效。

某些止痛药是必须按时服用的，某些止痛药是“需要时”才服用。意指在痛初发时即服用以免“疼痛加剧”。

疼痛治疗法

非药物止痛法：

须与您的医护人员讨论，以获取更多资讯。

- 热/冷敷。
- 调整身体的姿势。
- 音乐治疗。
- 松弛肌肉、意想治疗。
- 触摩治疗。
- 催眠术治疗。

止痛药物：

- 不含麻醉性的药物（如对乙酰氨基酚 Tyenol 阿司匹林 Aspirin、布洛芬 Ibuprofen）。
- 鸦片制剂（如吗啡）。
- 局部麻醉（以药物封锁神经传导疼痛）。

止痛药的使用种类：

- 口服（药片、胶囊、液体）。
- 类似胶布的皮肤贴剂。
- 静脉针剂（静脉注射）。
- 经电脑可自行控制的静脉注射剂。
- 在背部脊椎间隙插入微细导管输止痛剂（硬膜外的导管）。

对止痛药的误解

1. “会上瘾”。

有些人对服用止痛药很犹豫因为他们怕会因此而上瘾。根据研究显示这是错误的观念。当正确的服用止痛药时，患者很少或几乎从未因此而上瘾。

2. “我会有严重的副作用”。

如发生恶心、皮肤发痒、想睡或便秘等副作用时、既可以改用不同的止痛药或药的剂量来避免。或采用其他简易治疗方法来解决。

3. “我不想让他人认为我很喜欢抱怨”。

索求止痛药是您的权利。更何况您的医护人员需要清楚知道您所有的症状；包括您的疼痛，才能为您提供更好的治疗。

如不及时止痛，可因发生下列情况而使痊愈延缓：

- 无法休息或睡眠。
- 深呼吸、咳嗽或步行有困难。
- 失去食欲。
- 因为独自面对疼痛而导致情绪低沉或沮丧。

就因会发生上述这些情况，当您的疼痛无法控制时，您务必告诉您的医护人员。

控制滔滔是很重要的。它使您觉得体力强些，有助于您对疾病的承受力或手术后的复原。

请告诉我们您那里痛

请告诉您的医生、护士、药剂师、亲友：

- 您那里痛。
- 怎么痛（刺痛、隐痛、抽痛。。等等）。
- 有多痛。

使用痛的量度表，它可以帮您形容痛的强度。
 以下是三种度量方法。（您可以选用）

| | | | | | | | | | | |
|----|---|---|---|---|---|---|---|---|---|----|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 不痛 | | | | | | | | | | 最痛 |

| | | | | |
|----|------|---|----|----|
| 不痛 | 有一点痛 | 痛 | 很痛 | 剧痛 |
|----|------|---|----|----|

| | | | | | |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
|  |  |  |  |  |  |
| 0 | 1 | 2 | 3 | 4 | 5 |
| 不痛 | 稍痛 | 痛 | 很痛 | 更痛 | 痛得厉害 |

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- 一直都痛？还是有时痛有时不痛？
- 何种情况下疼痛会加剧？
- 怎样可以减轻疼痛？

有关止痛药的问答

问：我应该服用多少止痛药？

答：遵照药瓶上的指示服用。如果您的疼痛没减轻，您必需与您的医生联系讨论是否需要更换止痛药以便控制疼痛。

问：要等多久止痛药才会开始生效？效力可以维持多长？

答：即效止痛药服药后约 30 分钟生效，效力大约可以维持 4 小时。如 Oxycodone, 及 morphine.

长效止痛药服药后约 60 分钟生效，效力大约可以维持 8-12 小时。长效止痛药如 Morphine SR 及 Oxycontin。服药时不可把这类药片打碎或咬碎，必须整个药吞服。

问：一般止痛药常见的副作用是什么？我如何可以避免？

答：便秘：多喝水,吃软大便的药如 docusate (Colace)可以防止便秘.如您已经便秘了，可用泻药，如 senna 等。如便秘的问题仍然持续，请与您的医生联络。

头昏：避免喝酒，及其他会引起头昏的药。因为它们与止痛药同时服用会使头晕加重。服用止痛药时不要驾车，或操作机器。

想吐：如服用止痛药会引起胃部不适，就与食物一起吃。

问：我如何再配止痛药？

答：大多数麻醉性的止痛药每次配药时需要新处方。您的药剂师可以告诉您的止痛药可以再配，或联络您的医生再开新处方。

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC staff are also available to help.

206-598-_____

206-598-_____

Or, call the main UWMC operator at 206-598-3300.

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Ways to Improve Communication with Your Health Care Provider

Talk over these issues:

1. Ask your health care provider what to expect.
 - Will there be much pain after surgery or with my illness?
 - How long is it likely to last?
2. Discuss your pain control options:
 - Tell us what pain control methods have worked well in the past.
 - Tell us how you use drugs or alcohol. You may need your medicine dose adjusted.
 - Talk about any concerns you have about pain medicines, such as fear of addiction.
 - Ask about side effects that may occur with treatment.
3. Learn about the assessment tools used to measure your pain. (See insert, "Tell us about Your Pain.")
4. Ask for pain medicines when you first begin to feel pain. Tell your health care provider if you have pain that won't go away or that is new.
5. Include your family or support persons in making a pain control plan.



Pain Management

A guide for patients

Most pain can be managed with medicine and other treatments. This guide gives information about controlling pain and talking with your health care providers so we can find the methods that work best for you.

Patient Rights and Responsibilities

I have the right to have my pain:

- Believed by all involved in my care.
- Checked on a regular basis.
- Dealt with quickly.

I am responsible for:

- Asking about my pain relief options.
- Describing and rating my pain.
- Asking for medicine when my pain first begins.
- Telling if the medicine or treatment worked.

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Some pain medicines should be taken on a regular basis while others are taken “as needed.” This means you need to take the pain medicine when you first begin to feel pain so that you can “stay on top” of the pain.

Therapies for Pain

Non-drug methods to help ease your pain:

Talk with your health care provider to learn more about:

- Hot/cold packs.
- Positioning.
- Music therapy.
- Relaxation, imagery.
- Therapeutic touch.
- Hypnosis.

Pain may be managed with these medicines:

- Nonopioids such as Tylenol, aspirin, ibuprofen.
- Opioids (such as Morphine).
- Local anesthetics (medicines that block pain signals at nerves).

Pain medicines may be given by:

- Mouth (pills, capsules, liquid).
- A bandage-like patch placed on your skin.
- A needle placed in your vein (IV line).
- A machine that allows you to control your IV medicine (PCA).
- A small tube inserted in your back in the area around the spinal cord (*epidural catheter*).

Myths about Pain Medications

1. *“I might get addicted.”*

Some people don’t want to take pain medicine because they are afraid they will become addicted. Research has shown that this is not a problem. When pain medicines are used as prescribed, patients rarely, if ever, become addicted to them.

2. *“I’ll have terrible side-effects.”*

Side-effects like nausea, itching, sleepiness, or constipation can be resolved by changing the medicine, changing the dose, or adding simple treatments.

3. *“I don’t want to seem like a ‘complainer.’”*

You have a right to ask for pain relief. Also, your health care providers need to know about all of your symptoms, including pain, in order to give good care.

Pain that Is Not Relieved Can Delay Healing by:

- Making it hard to rest or sleep.
- Making it hard to breathe deeply, cough or walk.
- Causing you to lose your appetite.
- Making you sad or anxious by trying to deal with your pain alone.

For these reasons, please tell your health care provider when your pain is not being well controlled.

Taking care of your pain is important. It helps you feel stronger and better able to cope with your illness or get better from surgery.

Tell Us About Your Pain

Tell your doctor, nurse, pharmacist, and family or friends:







- Where you feel pain.
- What it feels like (sharp, dull, throbbing, etc.).
- How strong the pain feels.
- If the pain is always there or if it comes and goes.
- What makes the pain worse.
- What makes the pain better.

Pain Scales

Using one of these pain scales will help you tell us how much pain you feel. Use the one that works best for you.

| | | | | | | | | | | |
|------------|---|---|---|---|---|---|---|---|---|---------------|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| No Pain | | | | | | | | | | Worst Pain |

| | | | | |
|---------|------|----------|--------|--------------|
| No Pain | Mild | Moderate | Severe | Excruciating |
|---------|------|----------|--------|--------------|

| | | | | | |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
|  |  |  |  |  |  |
| 0 No hurt | 1 Hurts a little bit | 2 Hurts a little more | 3 Hurts even more | 4 Hurts a whole lot | 5 Hurts worst |

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Facts About Opioid Pain Medicines

Q. How much medicine should I take?

- A. Follow the instructions on the prescription bottle. If your pain does not get better, call your health care provider to talk about changes in your pain medicines.

Q. How long does it take the medicine to start working and how long will it last?

- A. **Immediate-acting medicines** start working in about 30 minutes and last about 4 hours. Examples are *oxycodone* and *morphine*.

Slow-release medicines start working in about 60 minutes and last 8 to 12 hours. Examples are *Morphine SR* and *Oxycontin*. **Do not** crush or chew these medicines. Swallow them whole.

Q. What are the common side effects caused by pain medicines? How can I avoid them?

- A. **Constipation:** To prevent constipation, drink plenty of water and take a stool softener such as *docusate* (Colace). If you become constipated, use a laxative such as *senna* or *milk of magnesia*. If the problem continues, call your health care provider.

Drowsiness: Avoid alcohol and other medicines that make you sleepy because they'll add to the drowsiness caused by the pain medicines. Do not drive or operate machinery while taking pain medicines.

Nausea: Take the pain medicine with food if you are having an upset stomach.

Q. How do I get a refill of my pain medicine?

- A. Many opioid pain medicines require a new prescription each time you need a new supply. Your pharmacist will be able to tell you if you can get refills of your pain medicine or if you need to call your health care provider for a new prescription.