



UW Medicine

## 脊椎手术后的疼痛控制

预期

本手册介绍了脊椎手术后你可能出现的不同类型的疼痛。它解释了我们将如何帮助你管理你的疼痛。

### 手术后我会出现哪些疼痛呢？

手术导致急性（短期的）疼痛。急性疼痛是复原的一部分。

手术后，你会因为以下情况感到急性疼痛：

- 伤口
- 组织受伤
- 发炎，身体对受伤的自然反应

### 手术后如何控制疼痛？

疼痛控制是手术后护理的重要部分。我们会和你一起帮助你控制你的疼痛。我们会尽量让你觉得舒服些。

**你不会完全无疼痛。** 我们的目的是帮助你控制疼痛以便你做一些有助于你复原的运动。在康复期你会因活动增加而感到有些不舒服。

我们会多次询问你的疼痛级别。请告诉我们你的感觉。你的反馈很重要。

### 类鸦片止痛药

大部分患者在手术后都服用处方止痛药（类鸦片）。类鸦片帮助控制急性疼痛。他们不是用来治疗慢性（长期）疼痛。手术后的类鸦片处方不会超过6周。

### 多模式综合法

我们会用多模式综合法（多种方法）来控制你的疼痛。这会降低类鸦片可能导致的一些问题的风险。



用冰袋放在手术区域来帮助你减缓疼痛。  
（见第三页，“非药物性控制疼痛。”）

## 住院期间

起初，大部分患者都会服用鸦片类和其他止痛药。我们的目标是再你回家前缓慢地减少你的鸦片量。

## 在家

- 继续减少你的鸦片量。最开始，按时遵照你的处方服用你的止痛药。然后，开始减少服用量，或在两次服用时延长服药时间，或双步进行。
- 当你服用鸦片剂量时，需要点耐心。这可能需要等20-30分钟才会开始生效。药效可能要近一个小时才会完全发挥效果。
- 如果你的医生说你可以服用对乙酰氨基酚 - 泰诺 (acetaminophen - (Tylenol))，你可以每6个小时服用650毫克，或每8个小时服用1000毫克。这么做可以帮助你减少你的鸦片剂量。
- 如果你没有脊椎融合术并且你的医生说你可以服用非甾体类抗炎药 (NSAIDs)，您也可以每6至8小时服用400至600毫克布洛芬 (Advil, Motrin)。如果您患有心脏病或肾脏疾病或有消化道出血史，请勿服用NSAIDs。

## 我怎么知道服用哪种止痛药？

这张表可以帮助您决定疼痛的治疗方法：

疼痛程度	感觉	如何做
轻度疼痛	你会感到有些疼痛，但它不会让你远离日常活动。	<ul style="list-style-type: none"><li>• 根据需要使⽤泰诺。</li><li>• 根据需要使⽤冰敷（参见第3页）。</li></ul>
中度疼痛	使你无法进行医生建议的活动。	<p>你需要更多的疼痛控制。</p> <ul style="list-style-type: none"><li>• 每天服用泰诺2至3次。</li><li>• 活动后或感到疼痛时使⽤冰块（参见第3页）。</li><li>• 仅在需要时服用阿片类药物。</li></ul>
严重的疼痛	让你无法进行任何活动。你觉得你不能做日常的任务，比如起床，穿衣服或走路去洗手间。	<ul style="list-style-type: none"><li>• 每6至8小时服用泰诺。</li><li>• 按照处方服用阿片类药物。</li><li>• 每2至3小时使⽤一次冰敷（参见第3页）。</li></ul>

## 非药物控制疼痛

为了帮助你控制疼痛：

- **使用冰袋。**每2至3小时，将冰袋放在手术区域约20分钟。为了保护你的皮肤受损，请在你的皮肤和冰袋之间放一块干净的毛巾。
- **分散自己的注意力。**尝试放松，呼吸，音乐，阅读以及其他方法，将注意力集中在除疼痛之外的事物上。

## 为了你的安全

- 在伤口完全愈合之前，不要在背部使用热敷。
- 服用阿片类药物时：
  - 不要喝酒。阿片类药物和酒精一起可以让你头晕目眩，减缓呼吸。他们甚至可以导致死亡。
  - 不要驾驶或使用机器。
  - 将阿片类药物存放在上锁的地方。
- 我们将为你提供麻醉剂（纳洛酮）的处方。该药用于治疗阿片类药物过量。如果您想了解有关narcan的更多信息，请访问[stopoverdose.org](https://stopoverdose.org)。
- 安全地处理任何剩余的阿片类药物。金县（King County）有一个药物处理计划收集你不再需要的药物。查找你附近的投递箱，请访问<https://kingcountysecuremedicinereturn.org>。如果你出门困难，你也可以申请邮寄信封邮寄。

## 如果我便秘了怎么办？

一些止痛药会导致便秘（硬便）。帮助缓解此情况，你可以：

- 多吃纤维。多吃新鲜水果和绿叶蔬菜。
- 多喝水，每天6到8杯。
- 使用大便软化剂，如比沙可啶- bisocodyl（乐可舒Dulcolax），聚乙二醇- polyethylene glycol（Miralax），番泻叶- senna（Senokot）和多库酯- docusate（Colace）。你可以不用处方就能买到这些药物。每种药物针对便秘的治疗方法不同。服用阿片类药物时，按照指示服用其中一种或多种。
- 如果这些方法无效，请联系门诊咨询建议。

## 如果 6 周后我还需要药物补充怎么办？

如果你的处方已接近 6 周，但你仍觉得需要要鸦片类药物：

- 告知你的家庭医生或你的疼痛科医生。
- 在你用完鸦片类药物前和给你开慢性疼痛药物的医生见面。

## 联系人

- 如果你的疼痛无法控制或恶化，请拨打206.744.9340分机号2，联系脊椎科门诊护士。
- 如果你在工作日有以下情况，请联系206.744.8701骨科药房：
  - 对你的止痛药有疑问。
  - 需要如何减少鸦片类药物服用的建议。
  - 需要药物补充。你必须亲自到海景医院（**Harborview**）领药或允许72个工作小时的时间把你的处方邮寄给你。
- 如果你需要其他药物补充，比如说肌肉放松剂，请联系你的家庭医生。

## 疑问？

你的疑问很重要。如果你有任何疑问或疑问，请联系你的医生或其他护理人员。

工作日上午8点到下午4点。请联系海景医院神经外科：206.744.9340，分机号2。

下班时间，周末和节假日，请联系 206.744.2500。

## Pain Control After Spine Surgery

### *What to expect*

*This handout describes the different types of pain you will have after spine surgery. It explains how we will help you manage your pain.*

### **What kind of pain will I have after surgery?**

Surgery causes *acute* (short-term) pain. Acute pain is a part of healing.

After surgery, you will feel acute pain from:

- The incision
- Tissue damage
- Inflammation, the body's natural response to injury

### **How is pain managed after surgery?**

Pain control is a big part of your recovery. We will work with you to manage your pain. We will do all we can to help make you comfortable.

**You will not be pain-free for some time.** Our goal is to control your pain so you can do the activities that will help you recover. You will have discomfort as you recover and become more active.

We will ask you about your pain level many times. Please tell us how you are feeling. **Your feedback is vital.**

### **Opioid Pain Medicines**

Most patients take prescription pain medicine (*opioids*) after surgery. Opioids help control acute pain. They are not used to treat *chronic* (long-term) pain. **We will prescribe opioids for no more than 6 weeks after surgery.**

### **Multi-modal Approach**

We will use a *multi-modal approach* (many methods) to control your pain. This helps lower your risk of some of the problems opioids can cause.



*Use an ice pack on the area of your surgery to help ease pain (see "Pain Control Without Medicines" on page 3).*

## In the Hospital

At first, most patients will take both opioids and other pain medicines. Our goal is to start slowly decreasing your opioid dose even before you go home.

## At Home

- Keep *tapering* (decreasing) your opioid dose. Take it as prescribed at first. Then start to take a lower dose, or wait longer between doses, or both.
- When you take a dose of opioids, be patient. It can take 20 to 30 minutes for the opioids to start working. They may not reach their full effect for almost 1 hour.
- If your provider says it is OK for you to take acetaminophen (Tylenol), you may take 650 mg every 6 hours, or 1,000 mg every 8 hours. Doing this will help you taper your opioid dose.
- If you did **not** have a *spinal fusion* and your provider says it is OK for you to take *nonsteroidal anti-inflammatory drugs* (NSAIDs), you may also take 400 to 600 mg of ibuprofen (Advil, Motrin) every 6 to 8 hours. **Do not take NSAIDs** if you have heart or kidney disease or a history of *gastrointestinal* bleeding (bleeding in your digestive tract).

## How do I know which pain medicine to take?

This table can help you decide what to take for pain:

Pain Level	How It Feels	What to Do
<b>Mild Pain</b>	You feel some pain, but it does not keep you from your daily activities.	<ul style="list-style-type: none"><li>• Use Tylenol as needed.</li><li>• Use ice as needed (see page 3).</li></ul>
<b>Moderate Pain</b>	Pain keeps you from doing the activities your provider has advised.	You need more pain control. <ul style="list-style-type: none"><li>• Take Tylenol 2 to 3 times a day.</li><li>• Use ice after activity or when you feel pain (see page 3).</li><li>• Take opioids only if needed.</li></ul>
<b>Severe Pain</b>	Pain keeps you from doing any activity. You feel you cannot do basic tasks like getting out of bed, getting dressed, or walking to the bathroom.	<ul style="list-style-type: none"><li>• Take Tylenol every 6 to 8 hours.</li><li>• Take opioids as prescribed.</li><li>• Use ice every 2 to 3 hours (see page 3).</li></ul>

## Pain Control Without Medicines

To help manage your pain:

- **Use an ice pack.** Every 2 to 3 hours, place an ice pack on the surgical area for about 20 minutes. To protect your skin from damage, place a clean towel between your skin and the ice pack.
- **Distract yourself.** Try relaxation, breathing, music, reading, and other ways to focus your mind on something besides the pain.

## For Your Safety

- Do **not** use heat on your back until your incision is fully healed.
- While taking opioids:
  - Do **not** drink alcohol. Together, opioids and alcohol can make you dizzy and slow your breathing. They can even cause death.
  - Do **not** drive or use machines.
- Store your opioids in a locked place.
- We will give you a prescription for narcan (Naloxone). This drug is used to treat an opioid overdose. If you would like to learn more about narcan, please visit [stopoverdose.org](http://stopoverdose.org).
- Dispose of any leftover opioids safely. King County has a disposal program for medicines you no longer need. To find a drop-box near you, visit <https://kingcountysecuremedicinereturn.org>. You can also request a mail-back envelope if it is hard for you to leave home.

## What if I have constipation?

Some pain medicines can cause constipation (hard stool). To help with this:

- Eat more fiber. Eat plenty of fresh fruits and green leafy vegetables.
- Drink lots of fluids, 6 to 8 full glasses a day.
- Use stool softeners such as bisocodyl (Dulcolax), polyethylene glycol (Miralax), senna (Senokot), and docusate (Colace). You can buy these without a prescription. Each of these works differently to treat constipation. Take one or more of these, as directed, while taking opioids.
- Call the clinic for more advice if these methods are not working.

## What if I need refills after 6 weeks?

If you are nearing the end of your 6-week prescription, and you feel you still need opioids:

- Talk with your primary care provider (PCP) or your pain clinic.
- Meet with the provider who prescribes your chronic pain medicine before your opioids run out.

## Who to Call

- If your pain is not under control or it gets worse, call the Spine Clinic nurse at 206.744.9340 and press 2 when you hear the recording.
- Call the Orthopaedic Pharmacy at 206.744.8701 on weekdays if you:
  - Have questions about your pain medicines.
  - Want advice on how to taper your opioid use.
  - Need a refill. You must either pick up your prescription at Harborview or allow 72 business hours to have the written prescription mailed to you.
- Call your PCP if you need any other prescriptions filled, such as for a muscle relaxant.

### Questions?

Your questions are important. Call one of the numbers below questions or concerns.

Weekdays 8 a.m. to 4 p.m., call Harborview Spine Center at 206.744.9340 and press 2.

After hours and on weekends and holidays, call 206.744.2500.