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What You Should Know About Pain Medication

Pain medications, including opioids (narcotics), can be extremely helpful in the management of severe pain before and after surgical procedures. However, like all medications, serious side effects can occur. The careful use of these medications is the patient's responsibility and will significantly reduce the chance of these side effects. Please make sure to inform all healthcare providers of the medications that you are currently taking (including over-the-counter medications, herbal medications and prescription medications) in order to avoid potential drug interactions. This handout is meant to provide some basic information about various pain medications. Further information can be obtained from your primary care provider and your pharmacist.

What are the Types of Pain Medications?

Pain medications commonly used to treat spine and other neurosurgical conditions include mild to moderate pain relievers, often available over-the-counter. These medications include:

1) Acetaminophen (Tylenol) (APAP)

Acetaminophen is a common mild pain reliever. Used properly, it has few side effects. It does not have to be stopped prior to surgery. Tylenol is a very common addition to prescription medication like Vicodin and Percocet and many over-the-counter products. Carefully read labels to make sure the total amount of Tylenol you are taking does not exceed 3,000mg in a 24 hour period.

Symptoms of overdose may include nausea, vomiting, extreme tiredness, unusual bleeding or bruising, yellowing of the skin or eyes, and pain in the upper right part of the stomach. If you experience any of these, stop taking this medication and contact your healthcare provider or report to the closest emergency room.

2) Aspirin (ASA)

Aspirin is a common mild pain reliever. It is a blood thinner and is used to prevent heart attack and stroke. Before most surgical procedures, it will have to be stopped. The most common side effect is stomach upset. If you have a history of a bleeding disorder, are on other blood thinners, or have reflux (GERD) or peptic ulcer disease, you should ask your healthcare provider before taking this for pain management.

3) NSAIDs (non-steroidal anti-inflammatory drugs)

Ibuprofen (Motrin), naproxen (Aleve), meloxicam (Mobic) diclofenac (Voltaren) diclofenac topical patch (Flector patch), COX-2 inhibitors (Celebrex) (Celecoxib)

NSAIDs are common prescription and over-the-counter moderate pain relievers. The most common side effect is stomach upset, but serious gastrointestinal bleeding can occur. NSAIDs have blood-thinning effects, and these medications may need to be stopped before surgery. If you've been on over-the-counter NSAIDs daily for more than two weeks you should let your doctor know. It's important to be sure that you are not taking two different NSAID medications at the same time to avoid possible side effects. If you are on a blood thinner such as Aspirin, Coumadin or Plavix, be sure to notify your healthcare provider before taking NSAIDs.

Celebrex is a Cox-2 inhibitor NSAID medication often used for moderate pain. This type of NSAID may also need to be stopped before surgery. If you have heart disease, you should discuss with your primary care physician if this would be an appropriate choice for your pain management.

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4) Neuropathic Medications

Gabapentin (Neurontin), pregabalin (Lyrica), carbamazepine (Tegretol), amitriptyline (Elavil), nortriptyline (Pamelor)

These medications may be more helpful in treating neuropathic (nerve) pain. Some of these medications may need to be gradually increased over time and may not help immediately. Side effects of these medications include drowsiness and dizziness, and difficulty urinating. Other more serious side effects may include visual problems and should be reported immediately.

5) Opioids (Narcotics)

Hydrocodone/acetaminophen (Vicodin)
oxycodone/acetaminophen (Percocet)
oxycodone immediate release (OxyIR)
oxycodone sustained release (Oxycontin)
sustained release morphine (MScontin),
hydromorphone (Dilaudid), fentanyl
(Duragesic) tramadol (Ultram)

Narcotic pain medications, or opioids, are used to treat severe pain before or after surgery, or may be used to treat various painful musculoskeletal conditions. Used appropriately they can provide great relief and aid healing, but there are severe side effects associated with this class of medication. Physical dependence or tolerance can occur with opiate medication if taken for a period of time. Tolerance occurs when more of the drug is needed to achieve the desired effect as when it was first prescribed. Abrupt cessation of the drug then may lead to withdrawal symptoms, which can include involuntary bodily movements, insomnia, muscle and

bone pain, diarrhea and vomiting.

Long-term use of opioids can lead to addiction or compulsive drug-seeking behaviors to achieve a sense of well-being. If you have a history of alcohol or drug abuse in the past, you are at a higher risk for addiction and may need your pain medication monitored more closely. If you have no such history and you use the medications as instructed to control your pain, then your risk of addiction to these medications is lower.

Narcotic misuse is an increasing public health problem throughout the United States. You cannot share your narcotic medication with anyone, including family members. Selling or trading narcotic medication or altering prescriptions to illegally obtain opioids is a serious crime. It is the patient's responsibility to provide a safe environment for any opiate medication that is prescribed for them. If these medications cannot be safely controlled by the patient for any reason, we cannot continue to prescribe them. If your prescription or medication is lost or stolen, even once, regardless of the reason, the missing medication will not be replaced and no further narcotic prescriptions will be written.

Other adverse effects that may be associated with opioids include drowsiness and constipation. Serious life-threatening or even fatal respiratory depression (hypoventilation) may occur. Monitor closely, especially upon initiation or following dose increase. Illegal (street) drugs, alcohol, sleeping pills, anti-anxiety medications, and other opioid medication taken with opioids could also lead to life-threatening respiratory depression (hypoventilation) or death. We do not recommend that you drive or operate machinery while on narcotics. Accidental consumption of long-acting opioids can result in fatal overdose. Infants born to patients who used opioid therapy while pregnant may need treatment for neonatal opioid withdrawal symptoms. Prolonged use during pregnancy can result in life threatening neonatal opioid withdrawal syndrome.

You should follow the written prescription instructions and call the prescribing physician as soon as possible if you are experiencing any

noticeable side effect, or if the medication is not adequately controlling your pain. In general, it is better to start with the smallest necessary dose that provides adequate pain control and then increase the dose as needed based on your individual response to the medication.

The prescribed pain medication may not fully relieve all of your pain, but it is generally considered to be effective if you experience only mild discomfort when you walk or gently exercise. If you are not comfortable with your current response to the pain medication, please contact your physician to discuss alternative options.

Per Rhode Island Department of Health regulations, NO narcotic prescriptions can be called in over the phone at any time. The doctor on call will NOT accept any phone calls requesting pain medication. You must have an appointment and be seen in the office to be prescribed an opioid.

Storing Opioid Medications

These medicines must be stored in a locked container such as a 'lock-box'. These are available at pharmacies and other locations. Opioids must not be stored in an unlocked medicine cabinet, drawer, or other unsecured location.

Naloxone (Narcan)

Known as the 'rescue drug', this medication can be injected or used as a nasal spray to temporarily help someone who is not breathing from an opioid overdose. The effect may not last long, and 911 should be called immediately. Patients on higher doses of pain medications, or who have a history of overdose, or anyone who is also taking benzodiazepine medications such as Xanax or Valium should fill a prescription for Narcan. This medication is also available at certain pharmacies without a written prescription for either you or a friend or family member you are concerned about.

Safe Disposal

When medications for pain are no longer wanted or necessary for pain control, it is important to dispose of them properly to avoid harm to others. They can be dropped off at designated centers, flushed, or taken out of the bottle and mixed with kitty litter or coffee grounds before being thrown away.



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