

Making Pain Management a Priority Following Caesarean Section

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Introduction and background:

Numerous complaints were received from women who had been discharged from maternity services following caesarean section (CS). These patients had experienced severe pain following this procedure and had received inadequate analgesia. The Professional Lead contacted the Acute Pain Team (APT) who worked closely with the obstetric anaesthetists. Practice was audited and a strategy was put in place to ensure that women would have a much improved experience. "High quality pain relief is important after CS to promote early recovery and optimise mothers ability to care for their newborn" (Ismail et al 2012)

Aim:

The aim of the project was to ensure that all women who had undergone a CS received regular, safe, appropriate and effective analgesia. "Women who have had a CS should be prescribed and encouraged to take regular post-op analgesia" (NICE 2011)

Initial Audit 2012:

Initial audit performed to ascertain current levels of analgesia administered.

Drugs dispensed as prescribed	Day 1	Day 2
Paracetamol	56%	38%
NSAID	53%	47%
Codeine	66%	49%

- 53 patients
- All patients were prescribed a multimodal analgesic regime post op
- Drug prescriptions varied
- Drugs were not routinely dispensed on the post natal ward.
- **Negative Feedback from Patients**

"I had to remind staff that I needed painkillers, started crying"

"I didn't feel pain was important, I was scared to move"

"I was disappointed I had to keep asking for painkillers"

2 Year Improvement Strategy:

- Standardise Post CS analgesia prescribing – Drug chart medication stickers to be attached to all prescription charts in maternity theatres
- All midwives to attend mandatory pain education carried out by APT
- Consultant anaesthetist to carry out pain education for all junior obstetricians
- Four pain link midwives recruited who must attend three pain meetings per year
- APT will be available for advice and ward visits
- Update post CS Guidelines

Follow Up Audit 2013:

Drugs dispensed as prescribed	Day 1	Day 2
Paracetamol	42.5%	65%
NSAIDS	25%	42.5%
Codeine	30.8%	41%

Disappointing results 12 months in. Improvement strategy continued

Audit 2014:

Drugs dispensed as prescribed	Day 1	Day 2
Paracetamol	65%	86.4%
NSAIDS	78.8%	68.2%
Codeine	42.9%	44.4%

All Drugs -
 % of patients receiving all doses prescribed



Conclusion:

- Continued increase of women receiving effective analgesia
- Midwives report an increase in awareness of safety profile of analgesia
- Between January and June 2014 APT contacted 28 times by midwives to review post section women
- **Positive feedback from patients and midwives**

"Did not need any analgesia but was always offered" patient

"Advised what to take and when" patient

"I worked on this ward 5 years ago, the change in pain management is amazing" Midwife

"Very happy with pain management, did not need to ask for painkillers" patient

"Drug round may seem task orientated but works in so many ways" Midwife

Future Plans:

- Patient information leaflet awaiting printing
- Use of dihydrocodeine being considered following MHRA problems with codeine
- Midwife Education programme ongoing
- Continue regular audits



References

Ismail S, Shazad K & Shafiq F (2012) Observational study to assess the effectiveness of postoperative pain management of patients undergoing elective caesarean section. Journal of Anaesthesiology and Clinical Pharmacology, 28, 36-40
 NICE Guidelines (2011) www.nice.org.uk