

PRESCRIBING ANALGESIA AFTER CHILD BIRTH

NORMAL VAGINAL BIRTH

Following a normal vaginal birth a woman's pain should be individually assessed, but common practice would involve prescriptions for:

- Paracetamol 1 g PR + diclofenac 100 mg PR stat following perineal repair.
- Paracetamol 1 g QID PRN
- Ibuprofen 400 mg TDS PRN or diclofenac 75 mg SR BD PRN (provided no contraindication)

CAESAREAN SECTION OR COMPLICATED VAGINAL BIRTH

Practice point: Regular administration of simple analgesia is important for good post-surgical pain management. Priority should be given to ensuring paracetamol is routinely administered every 6 hours and diclofenac (if not contraindicated) with breakfast and dinner. Missed doses increase difficulty in controlling post-surgical pain.

Following caesarean section or more complicated vaginal birth the following medications are commonly prescribed:

- Paracetamol 1 g QID for 5-7 days then PRN
 - Diclofenac 75 mg SR BD or ibuprofen 400 mg TDS for 5 -7 days and then PRN (provided no contraindication)
- PLUS
- Oxycodone 5-10 mg PO Q2H PRN max 80 mg in 24 hours for 48 hours postpartum
- THEN SWITCH TO
- Oral morphine 5-10 mg, Q2H PRN, max 40 mg in 24 hours (from 48 hours, once oxycodone is finished until discharge)
 - Tramadol 50-100 mg, QID PRN may be prescribed throughout the postpartum period provided there are no contraindications (e.g. risk of serotonin toxicity due to concurrent use of SSRI or SNRI antidepressants)

AT DISCHARGE

Provide women with the patient information leaflet 'Pain relief after childbirth: What you need to know when you go home' ([Ref.2310944](#)). See [Appendix 1](#)

Common practice is to prescribe a 2 week supply of PRN paracetamol and if needed diclofenac or ibuprofen.

For women who require strong analgesia at discharge assess on an individual basis, consider a prescription for either tramadol or morphine (with a recommendation of a maximum of 20 x 50 mg tramadol or

8 x 10 mg morphine tablets to be supplied on the prescription).

Codeine may be an option for non-breastfeeding women (maximum 40 x 30 mg tablets to be supplied).

If women require further analgesia they should consult their midwife or GP.

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Prescribing Analgesia after Child Birth

Maternity Guidelines

Christchurch Women's Hospital

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APPENDIX 1 PAIN RELIEF (AFTER CHILDBIRTH)

Pain Relief (After Childbirth)

WHAT YOU NEED TO KNOW WHEN YOU GO HOME

Patient Information — Maternity Services

You have been given a prescription for pain relief medicine. This leaflet provides information on pain relief prescribed for women after giving birth.

- Please tell your doctor and midwife if you have any allergies or medical conditions.
- Please tell your doctor, midwife and pharmacist about **ALL** medicines you are taking (including items you buy at a pharmacy, supermarket or health store such as vitamins, herbal products, inhalers, creams, etc.)

Paracetamol

Take TWO tablets FOUR times a day. Space doses at least FOUR (4) hours apart.

Take your next dose at: _____

- This is for mild to moderate pain relief. It is useful for severe pain when used with other pain relievers
- Never take more than the stated dose (usually up to 8 tablets (= 4 g) in a day (24 hours) for adults). Taking too much paracetamol can cause liver failure.
- At normal doses, paracetamol is very safe and has few unwanted effects.
- Take regularly for the first 3 to 5 days, especially if your pain is constant.
- Check that other medicines you may be taking (such as other pain medicines or cough and cold medicines) do not contain paracetamol. If they do, they are part of your total daily maximum dose of paracetamol and should not be taken together.

Anti-Inflammatory

Non-Steroidal Anti-inflammatory Drugs = NSAIDs (Diclofenac/Ibuprofen)

You have been given a prescription for: _____

Take _____ tablet(s) _____ times a day. Remember to take each dose with food. If they are SR = sustained release tablets they need to be swallowed whole.

Take your next dose at: _____

- This is for mild to moderate pain relief. It is also useful for severe pain when used with other pain relievers.
- **Take with food and a large glass of water.** This will help to reduce unwanted effects such as indigestion and possibly stomach ulcers.
- Let your doctor and midwife know if you have heart, kidney or liver problems, have had a stomach ulcer, asthma, or if you take aspirin, warfarin or dabigatran (blood thinners). Your doctor/midwife will need to check if NSAIDs are safe for you.
- Do not take more than one type of NSAID at any time.

Pain following childbirth is expected to improve quickly especially if you remember to take your paracetamol and NSAID tablets regularly. In addition, on discharge, you may be given a prescription for a small supply of opioids usually either tramadol or morphine tablets.

Opioids

Tramadol/low dose Morphine/Codeine Phosphate

You have been given a prescription for: _____

Take _____ tablet(s) _____ times a day. Space doses by at least FOUR (4) hours.

Take your next dose at: _____

- This is for moderate pain relief. It works best when taken with paracetamol and/or an NSAID, if appropriate.
- Low dose morphine is prescribed for breastfeeding women who can not take tramadol.
- Codeine phosphate should only be prescribed for those women who are not breastfeeding.
- You will need less of these types of medicines as the pain reduces. These medicines can be addictive if you take them for a long time.
- These medicines may make you feel sick and may cause constipation. To help prevent this try to eat more fibre and drink plenty of water. You may also be prescribed laxatives if you get constipated, or have had problems with constipation before. Talk to your GP /midwife or pharmacist if constipation or feeling sick is a problem.
- **If you become drowsy or dizzy, do not drive or operate machinery.**

You may not be prescribed all the pain medicines on this sheet.

Your prescription from hospital will be for the pain relief medication that is best suited to you.

You will be given a supply of up to TWO (2) weeks treatment with paracetamol and diclofenac or ibuprofen and up to 4 days supply of stronger pain relief (either tramadol, morphine or codeine).

If you continue to experience more severe pain contact your midwife or GP.

Other medicines you can buy at a pharmacy, supermarket or health store may be very similar to the ones you have been prescribed in hospital.

Always read the label and if supplied, the leaflet inside the box. Make sure you know exactly what your medicine is for.

Do not share any of the medicines that have been prescribed for you with other people.

For more information about: - your health and medication, go to www.healthinfo.org.nz
- hospital and specialist services, go to www.cdhb.health.nz