Managing your pain with Patient Controlled Analgesia (PCA)

Information for patients and families

Read this booklet to learn:

- What it patient controlled analgesia (PCA)
- Why it is important
- How it works
- Possible side effects

Please visit the UHN Patient Education website for more health information: www.uhnpatienteducation.ca

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Why is it important to relieve my pain?

You will get better faster if your pain is well controlled.

Less pain means less stress on your body. Your body heals better with less stress. You can breathe deeply and cough and move more easily.

Less pain will decrease your risk of problems such as:

- Infection
- Trouble breathing
- Muscle spasms
- Heart attack

Your health care team will work with you to help you manage your pain. Since you know your own pain best, we will work with you to help you manage it. One way to do that is with patient controlled analgesia (PCA).

What is patient controlled analgesia?

Medicine for pain is called analgesia. Patient controlled analgesia allows you to treat your own pain without having to wait for a nurse to give you the medicine. You give the pain medicine to yourself by pressing a button.

There are two kinds of PCA:

1. **Intravenous PCA.** A small tube is put in the vein in your arm. Pain medicine is delivered to your body through your veins.

2. **Epidural PCA.** A small tube is put in your back. Pain medicine is delivered near the nerves in your back.

**Together with your health care team you can decide which method is best for you.**
Intravenous PCA

How does intravenous PCA work?

Intravenous (IV) means inside the vein. Medicine can be put into the vein in your arm through a small needle or a plastic tube called a catheter.

A PCA pump is connected to your IV in the recovery room after your surgery. The pump gives you pain medicine through your IV when you push the button. You will hear a beep when you press the button. This means you are receiving pain medicine.
When should I press the button?

- **When your pain just starts to become uncomfortable.**
  Do not wait until the pain is bad.

- **Before you do something that brings on the pain.**
  For example, take it before you do your physiotherapy.

- **Before breathing and coughing exercises.**

- **Before you start to move or turn.**

The medicine will take 5 to 10 minutes to work.
Press the button as often as you need to control your pain.

Can I give myself too much medicine?

It is unlikely that you will give yourself too much medicine. There are two functions on the PCA pump that keep you safe:

- A safety timer called a lockout. If you press the button during the lockout time, you will not receive any more medicine and you will not hear a beep. After you press the button once, you will not be able to press it again for 5 to 10 minutes.

- A limit to how much pain medicine you can receive in 4 hours. The PCA pump has a computer that keeps track of how much medicine you are getting. It will not give you any medicine over a limit your doctor sets.

Your nurse and the Acute Pain Service will be checking on you often while you are using the PCA pump.
What are the side effects and complications?

The most common side effects are minor and easy to treat.

Some side effects are:

- Nausea (wanting to throw up)
- Vomiting (throw up)
- Sleepiness
- Finding it hard to think clearly
- Slowed breathing
- Itching, usually in several small areas on your body.
- Trouble emptying your bladder. You may have a small tube inserted to empty urine from your bladder after surgery.

What is an epidural?

An epidural is a small tube placed in your back by a doctor. This is the same way that women are given pain medicine when they give birth.

How is the epidural put in?

The epidural is usually put in before your surgery. To put in the tube, you have to lie on your side in a curled up position or you sit up and hunch over a little.

An anesthesiologist (the doctor who manages your pain) will clean an area on your back. Then, they will numb that spot and place a needle into your back. You may feel a little discomfort or pressure when the needle is being placed into your back.

A small tube is then placed through the needle. The doctor will remove the needle and tape the small tube to your back. Medicine is given through the tube to relieve your pain.
How does epidural PCA work?

A PCA pump is attached to the epidural tubing to give you pain medicine all the time. You can press the button to receive more pain medicine if you need it.

When should I press the button?

- **When your pain just starts to become uncomfortable.**
  
  Do not wait until the pain is bad.

- **Before you do something that brings on the pain.**
  
  For example, take it before you do your physiotherapy.

- **Before breathing and coughing exercises.**

- **Before you start to move or turn.**

The medicine will take 15 to 20 minutes to work.

Press the button as often as you need to control your pain.
What are the side effects?

The most common side effects are minor and easy to treat.

Some side effects are:

- Numbness around where you had your surgery.
- Weakness or heaviness in your legs
- Nausea or vomiting
- Sleepiness
- Slowed breathing
- Itching
- Having trouble emptying your bladder. Often patients have a small tube inserted to empty urine from their bladder after surgery. This tube will be removed once your epidural tube is taken out of your back.
- A mild drop in blood pressure. If your blood pressure drops you may feel nauseous or dizzy. Giving you fluids through the intravenous (IV) can treat this.
- Backache. Although some patients get backache after an epidural, the pain doesn’t usually last long.

Very rarely, an epidural may cause problems that continue even after it is taken out.

Some of these problems include:

- Weak feeling in your legs
- Unable to move your legs
- Seizures
- Heart attack

The doctor who manages your pain (anaesthesiologist) will carefully check you to avoid any of these problems.
Do not do this while using the PCA:

- **Do not let visitors and family press the button.** Only you should push the PCA button.
- **Do not wait until the pain is bad** before using your pain medicine.
- **Do not use PCA when you are comfortable or sleepy.**
- **Do not use intravenous PCA for gas pain.** An epidural PCA is better for this.

### When is PCA started and stopped?

Both intravenous and epidural PCA are started after your operation and are stopped when you are able to take pain medicine by mouth (pills).

Once the PCA is stopped, please ask your nurse for pain pills when you need them.

### When should I ask for pain pills?

- **When your pain just starts to become uncomfortable.**  
  Don’t wait until the pain is bad.
- **Before you do something that brings on the pain.**  
  For example, take it before you do your physiotherapy.
- **Before breathing and coughing exercises.**
- **Before you start to move or turn.**

The pills will take 30 to 45 minutes to work. Ask for pain pills as often as you need to control your pain.
What happens if I still have pain?

Tell your nurse or doctor if you still have pain.

The nurses will ask you rate your pain on a 0 to 10 point scale.

- 0 is no pain.
- 10 is the worst pain.

You can also use words such as mild, moderate, or severe to describe your pain.

You and your family are an important part of the team that manages your pain.

For more information about pain management at UHN, please visit our website at

www.uhn.ca/Surgery/PatientsFamilies/Anesthesia