

Postoperative pain management in the emergency laparotomy patient over 65

- All emergency laparotomy patients should return to the ward with rectus sheath catheters or an epidural.
- If the patient has not had an epidural, they should have a morphine/ fentanyl PCA.
- All patients should receive regular paracetamol.

Our analgesia guidelines aim to limit the use of opiates /tramadol in our older emergency laparotomy group, as they are associated with delirium in this group of patients.

1. Managing moderate/severe pain shortly after surgery

If the patient is in **moderate / severe** pain shortly after surgery, do they have a PCA?

Yes

Encourage use, if demand greater than delivered, may need to increase dose, contact pain team for advice.

No

May need PCA.
If the patient may find it difficult to use a PCA, prescribe subcutaneous (sc) morphine 2.5-5mg PRN maximum hourly. Ensure sc butterfly infusion catheter is placed.

2. When the patient no longer needs IV morphine/fentanyl

When the patient no longer needs iv opiates, are they absorbing enterally?

Yes

Continue regular paracetamol and prescribe oramorph for breakthrough pain. Dose 2.5-10mg 2 hourly (start low in older/frailer patients). In patients with renal impairment (CrCl<30ml/hour) prescribe Oxycodone 1 - 2.5mg 2 hourly.

Opiate toxicity

Ensure Naloxone 200 mcg iv PRN always prescribed with opiates, in case of opiate toxicity.

No

Consider **Clinical Frailty Scale score** (see score sSDC admission page 2/15)



CFS 1-3 Not frail

Has the patient had any side effects with tramadol?
No: prescribe Tramadol PRN at 50mg QDS and titrate cautiously to max dose 100mg.
Yes: prescribe sc morphine 2.5-5mg hourly PRN

CFS 4 Vulnerable

Has the patient had any side effects with tramadol?
No: prescribe Tramadol 25mg QDS PRN.
Yes: prescribe sc morphine 2.5-5mg hourly PRN

CFS 5-9 Frail

Do not prescribe tramadol
Prescribe sc morphine 2.5-5mg hourly PRN

LIMIT EXPOSURE TO OPIATES AND TRAMADOL, AS PAIN IMPROVES CONSIDER DEPRESCRIBING DAILY.
AIM TO DISCHARGE ALL PATIENTS OFF TRAMADOL AND ON MINIMAL OPIATES (CODEINE/ ORAMORPH) FOR A LIMITED TIME ONLY.

Contact details: 8am- 8pm Acute Pain team Bleep 5414. Out of hours on call anaesthetist Bleep 5101