



Pelvic Exenteration Support Day

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Service**

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Definition of Pain

An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage. IASP, 2020

Pain is always a personal experience that is influenced to varying degrees by biological, psychological, and social factors.

"Comparison is the thief of joy"



Prehabilitation

- A process to allow you to prepare for surgery or cancer treatment by improving your physical and mental well-being before the procedure begins.
- Focus on enhancing fitness, nutrition, and mental health to optimise recovery and minimise complications.
- Preparing you for the challenges and recovery process ahead.
- Pre-operative pain relief- aim to reduce modified release opioids and use instant release to exercise and function.



Pain Assessment

- Need a reliable and accurate assessment of pain.
- It is your pain, but healthcare professionals need to recognise and assess pain to help manage it.
- You may be asked to describe your pain. This is to provide information as to the type of pain.
- Everyone is different and manages pain in different ways.
- Functional activity scale. Our aim is to improve your pain so that you can function...deep breathe, cough, mobilise, turn in bed.
- Let your nurse/therapist know if you are unable to function due to poor pain control.



Assessments

UHS numerical/verbal pain tool

- 0 – No Pain
- 1 – Mild Pain
- 2 – Moderate Pain
- 3 – Severe Pain

Please say how your pain is on movement.

You may on occasions be asked to score 0 to 10.
0 being no pain and 10 being the worse pain



Functional Activity Scale

- No limitation: patient is able to undertake activity without limitation due to pain;
- Mild limitation: patient is able to undertake activity, but experiences moderate to severe pain;
- Significant limitation: patient is unable to complete the activity due to pain or pain treatment-related adverse effects



Types of pain

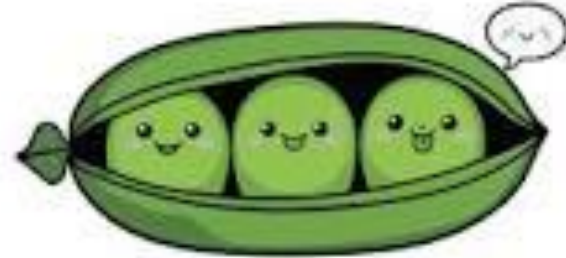
Cause	Cancer Non-cancer
Duration	Acute Chronic/persistent
Mechanism	<p>Nociceptive pain happens when your body gets hurt or is about to get hurt. Nociceptors send the pain signals to the brain.</p> <p>Neuropathic pain is caused by damage to the nerves that sense touch, temperature, and pain.</p> <p>Nociplastic pain is caused by changes in how the nervous system processes pain, even when there's no clear injury or inflammation. E.g. fibromyalgia.</p>



Treatment of Pain

The 3 'P's

- Pharmacology
- Physiotherapy
- Psychology



Post Operative Pain Management

- Initially you may have an epidural inserted in the anaesthetic room while awake. This is a small tube into the back administering local anaesthetic that stops you feeling pain in certain areas of the body.
- You may have a patient-controlled device that administers a small amount of opioid intravenously.
- Opioids can cause side effects. Let your nurse know so that these can be treated.
- Intravenous paracetamol is given alongside until you can take oral medicines



Oral Pain Relief

- Once able to take oral pain relief then you will be given regular paracetamol.
- You may be given a mid-range opioid or continue your pre-surgery regime.
- Instant release opioids are important to use to function. These are given on an 'as and when basis'. You will need to ask the nurse. Take these half an hour prior to therapy if required.
- Use opioids as required to be able to function. Start low and work up. This is to try to keep side effects to a minimum.
- We may add other medication depending on the type of pain.



Treat – Non-Pharmacological

Action	Example
Interventions	Pillows, positioning, elevation, cold or heat pads
Psychological	Talking, distraction, reassurance, mindfulness, managing expectations, chaplaincy and volunteers. PAT dogs.....everyone loves them.
Exercise	Mobilising, regular physiotherapy
Alternative treatments	Transcutaneous electrical nerve stimulation (TENS)



Support available whilst at UHS

- Surgical and nursing teams.
- Anaesthetic and pre-assessment team.
- On-call anaesthetists out of hours.
- Specialist nursing team.
- Therapy teams.
- Inpatient Pain Service. (We review all epidurals remotely whilst in critical care and then face to face on the ward.) If you feel that you would benefit from a review, then ask your team to refer.
- **Do not worry in silence or rely on Dr Google. Expert advice is available.**



Persistent Pain

Definition: pain that persists past the expected healing time of 3 months.

It does not indicate damage unlike acute pain (which serves as a warning signal for injury or illness) - persistent (or chronic pain) can become a condition in itself and is recognised as such

It is complex and involves multiple body systems: nervous system, muscle system, endocrine system and immune system- these all interact with each other to increase activity in persistent pain



Think about it like this.....

Persistent pain can best be likened to a burglar alarm system. The alarm is triggered when there is a burglar in the house as in acute pain, but continues to sound even once the burglar has left.



Who are we?

Multi-disciplinary teams- these services are made up of physiotherapists, psychologists, doctors, nurses, occupational therapists and health improvement practitioners

Our aim: to improve people's understanding of their pain, help reduce problems that pain causes, and improve their ability to manage pain

Focuses on both the physical and psychological aspects of coping with pain- as specific to YOU

Pain management is not trying to cure pain, although some people say their pain has reduced after being supported by a persistent pain service



How We Can Help?



- Increased understanding of persistent pain
- Improved confidence about ways pain can be managed
- Better physical functioning
- Greater confidence in moving
- Improvements in mood
- Better sleep
- Better relationships/communication

Pain Teams within Hampshire and IOW locality

**Referrals are based on location of GP
surgery**

Southampton Pain Team

Pain Management Team- Southwest Hampshire

Portsmouth Pain and CFS (Chronic Fatigue Service)



Additional resources and support

- [Persistent pain management :: Hampshire and Isle of Wight NHS Foundation Trust](#)
- **'Pain Explained'** leaflet within the above site- 2 versions
- **Talking Therapies**- slight differences depending on your geographical area
- **GP**- they will often be the path to access the help you require initially
- **'Keeping Pace With Pain'** (keepingpace.co.uk) -support group within Southampton locality- all welcome!
- **Charities:** Pain Concern, Live Well with Pain, 'Flippin Pain'



Thank you for listening!



**Any
Questions?**

