

Pain Relief after the Birth of your Baby

Why have I been asked to read this leaflet?

You have been given this leaflet to read alongside the pain relief you will take home after the birth of your baby. This leaflet is to help you understand the pain relief options that are available to you, how to take them and the common side effects. If you have any further questions or concerns, please do not hesitate to ask your midwife or doctor.

What tablets will I be given?

We aim to give you a range of medications to help with your pain. Each of these medications are safe to take together and work in different ways so they complement each other to give you the best pain relief.

- **Paracetamol**

This is the same medication that you can buy over the counter. You can take two tablets up to four times a day. Each tablet is 500mg so this means you are taking 1g each dose. You should not take more than 4g (8 tablets) in 24 hours. Make sure you do not take any other medication that contains Paracetamol, such as cold and flu medications alongside your Paracetamol. If you do take more than 4g in 24 hours you should seek medical help via 111.

It is considered safe for breastfeeding.

More information below in the section: Are these tablets safe for breastfeeding?

- **Naproxen**

This is similar to Ibuprofen and is known as a Non-Steroidal Anti-inflammatory or NSAID for short. You can take 500mg twice a day. We advise you to take Naproxen with food as it can cause stomach upset. It is considered safe for breastfeeding.

More information below in the section: Are these tablets safe for breastfeeding?

There are some occasions when we would not advise NSAIDs. These include

- Blood pressure problems such as pre-eclampsia
- Very heavy bleeding
- Kidney problems
- Low platelets

- Asthma
- Stomach ulcers

- **Dihydrocodeine**

This is a Codeine-like pain killer (a bit like Morphine) which is commonly effective for moderate to severe pain. You can take one (30mg tablet) every six hours. This means a maximum of 4 tablets in 24 hours. It is best taken as and when pain is most severe, for example in the early days after giving birth or after surgery. It can work best when taken before performing tasks which result in excess pain. It is considered safe for breastfeeding. *More information below in the section: Are these tablets safe for breastfeeding?*

It is strongly advised that this drug is not given to anyone else other than who it has been prescribed for. Any excess tablets left over when you have recovered should be returned to a local pharmacy/ hospital pharmacy or GP surgery for safe disposal.

A reliance on taking Dihydrocodeine can become a problem with prolonged use, which is why limiting it for severe pain episodes will give you better control of your pain. We would not expect you to need strong pain relief like Dihydrocodeine for longer than 2 weeks. If you are still struggling, please contact us at the Maternity Assessment Unit or through your GP.

It is rare, but people can develop an addiction to pain killers such as Dihydrocodeine with prolonged use is even though the pain killer action is no longer offering them pain relief qualities. Continued use of pain killers after 90 days is called chronic pain. If you have any worries about this, please speak to us here at the women's or speak to your GP.

How can I get the best out of my pain relief?

Take Paracetamol and/ or Naproxen at REGULAR intervals in the first two or three days after leaving hospital (they can be administered safely together or with time gaps). Taking pain medication regularly like this helps you to keep on top of the pain as it gives you a constant background level of pain relief.

In combination with these regular doses, you can take Dihydrocodeine AS AND WHEN the pain is at its worst or when you know you are going to be particularly active such as before a shower, or a walk. You can take one 30mg tablet every six hours. This means a maximum of 4 tablets in 24 hours.

At the end of this leaflet is a table that may help you to keep track of what you have taken and when. Having a newborn baby can make it difficult to keep track of your medications.

You will become good at balancing the need for pain relief medication, soon not needing any. You'd probably expect this to be within a week or two.

What are the common side effects of these tablets?

Most women will not have any side effects with Paracetamol when it is taken in the correct dosage. Naproxen can cause acid reflux and stomach ulcers. This is why we always advise you take it with food. If you develop problems with stomach pain we advise you to stop taking this medication.

Dihydrocodeine can cause constipation. This can be avoided by making sure you drink plenty of fluids and have a high fibre diet. It may be that you need laxatives to help avoid this. Over the counter medicines are safe to take but if you are breastfeeding, please check with your doctor or pharmacist what is the best option.

Dihydrocodeine when taken at rest may make you drowsy, and not make the best use of this strong drug. It affects some people more than others in this way.

Special attention must be given to taking Dihydrocodeine if planning on driving as it may lead to an increase in chances of drug-related road accidents and invalidate your vehicle insurance.

Are these tablets safe for breastfeeding?

We have chosen these medicines so that they are safe for mums no matter how they choose to feed their baby. Some manufacturers advise to avoid Naproxen with breastfeeding. It is common for manufacturers to advise caution for their medications in pregnancy and breastfeeding due to licensing of the product rather than the effects on mum or baby. We are happy to recommend Naproxen for breastfeeding mums as the amount found in breast milk is very small.

More information can be found on the breastfeeding and medication website. Accessible at <https://breastfeeding-and-medication.co.uk/> or via their information leaflet which can be found at <https://breastfeeding-and-medication.co.uk/fact-sheet/naproxen-and-breastfeeding>

Will I be given tablets to take home?

Yes. We will be giving you a week long supply of your tablets to take home. We would advise you to take the tablets regularly at first and then reduce them as you feel you need less. It is best to take the pain relief regularly when you first need it as it works better this way. You may find that as you start to do more activity when you are at home compared to being in hospital you have an increase in your pain. This can be normal and we would suggest taking your medications more regularly if you find this happening.

What should I do if I am still in pain?

As we all have different birth experiences there may be some women who need more pain relief. If you are still in hospital, please alert your midwife or doctor and they will assess you and make a plan with you for more pain relief.

If you are at home your community midwife will be visiting you so please let them know you need more pain relief. If the midwife is not visiting you that day or you cannot wait please call the Maternity assessment unit to speak to a midwife for advice.

Maternity Assessment Unit 0151 702 4164

This leaflet can be made available in different formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at pals@lwh.nhs.uk

Liverpool Women's NHS Foundation Trust
Crown Street
Liverpool
L8 7SS

Tel: 0151 708 9988
Issue Date: 14/07/2021
Reference: Mat/2024-324-v2
Review Date: 14/07/2027