A cancer diagnosis can impact you in many ways beyond the actual staging and treatment of the disease. As you schedule appointments with your gynecologic oncologist, you might have questions about various topics related to your health. The Your Guide series, available on the Foundation for Women’s Cancer website, is meant to be a patient resource that you can discuss with your health care provider. This fact sheet covers pain management during your hospital stay and postoperative recovery at home.

**Preparing for surgery**

Undergoing surgery can be a stressful experience for many patients. Some patients may fear that cancer will be found during the surgery while other women are undergoing surgery for a new diagnosis of cancer. Regardless of the situation, the weeks leading up to surgery can seem like a whirlwind of information. You may be worried about complications or recovering from surgery. Finally, you may fear being in pain and hurting. All of these thoughts, while stressful, are normal and understandable. This document will provide some information on helping to control your pain as you recover from surgery.

**Knowing your pain management options**

These are some of the methods your doctor may use to control your pain.

- **Ice packs** applied to your abdomen or incision are a great way to alleviate pain and reduce the amount of pain pills you’ll need.

- **Acetaminophen** (Tylenol®) reduces one of the inflammatory pain pathways in your body. This medicine can be taken around the clock to provide some continuous pain relief. Be careful if you have liver disease.

- **Non-steroidal Anti-inflammatory Drugs (NSAIDs)** such as ibuprofen (Motrin® and Advil®) or Toradol, are medicines which also work on an inflammatory pain pathway. They can also be taken around the clock to provide a baseline of pain control. Try alternating your dose timing with acetaminophen. Be careful if you have gastrointestinal ulcers or kidney disease.
Opiates (Oxycodone, Dilaudid, Percocet) are stronger pain medications. These have addictive properties and overdose risks so should be used with some caution but are generally considered safe when used for severe pain. You should use these for the shortest amount of time after surgery. Trying the other medicines mentioned above first can reduce the number of opiates you need to take.

**Patient-controlled analgesia (PCAs)** is sometimes used immediately after surgery. This is a pump controlled by you to deliver opiate pain medicine intravenously at low doses.

**Transverse abdominis plane (TAP) block** is a procedure performed by the anesthesiologists prior to your surgery to numb some of your immediate post-surgery pain.

**Spinal anesthesia** is a method of delivering long-acting pain medication prior to your procedure to control immediate post-surgery pain. It may also be called “intrathecal” analgesia. Some hospitals may also perform epidural pain pumps. These procedures are performed by your anesthesiologists.

### Opiate Guidelines
- Safely store opiates away from children and young adults
- Don’t take opiates with alcohol or medicines like sleep aids
- Never share or borrow pain medications
- Opiates may cause: Sleepiness, confusion, constipation, nausea/vomiting, itchiness
- Don’t take opiates for reasons other than pain

### What to Do with Unused Opiates
To minimize accidental consumption or misuse of medications, the US Food and Drug Administration (FDA) and the Environmental Protection Agency (EPA) recommend removing medications from the home as soon as they’re not needed. Some cities do not allow flushing of medications down the toilet because of their potential to contaminate waterways.

Even if your town allows flushing away unused medication, it is preferable to return unused meds to a “take-back” program. You can find a disposal center by contacting a local pharmacist or going to the US Department of Justice Drug Enforcement Administration website. The FDA has also developed a list of medicines you should flush when they are no longer needed and take-back options are not readily available.

### Don’t be afraid to ask questions
Every patient experiences pain differently and your medications will need to be adjusted to meet your needs. If you are having discomfort, feel that your medicines aren’t working, or have questions about your treatment, please make sure and talk to your doctor. The information presented in this is an educational resource is not a substitute for the direct care that your doctor will provide.

### Additional resources:

**Food and Drug Administration**
fda.gov/drugs/safe-disposal-medicines/disposal-unused-medicines-what-you-should-know