Patient-controlled analgesia
Information for patients
Department of anaesthesia and pain medicine

Patient-controlled analgesia
Patient-controlled analgesia (PCA) is a technique which allows you to receive small amounts of pain-relieving drug using a machine connected to your intravenous drip. When you press the button on the handset, a small amount of painkiller will go into your bloodstream.

This method of pain relief means that you are in greater control of your pain. If you feel pain, you will not have to wait for a nurse to answer your call bell. However, the nurses are there to help you and you can call them at any time.

If you are having an operation, your anaesthetist will speak with you and explain your pain relief options. The nursing staff will show you the machine and explain how it works. When you wake up from the operation a machine will be there ready to use.

If you are offered PCA for non-surgical pain, such as inflammation of the mucous membranes after chemotherapy (mucositis), the specialist pain nurses will discuss the benefits and side effects with you to help you make your decision.

Using the handset
If you are in pain press the button on the handset firmly.

The handset light flashes when delivering a dose of pain-relieving drug. The light goes out until the machine is ready to deliver the next dose, when the light comes on again.

If you have difficulty pressing the button you may call a nurse to help you.

Do not allow children and other visitors to press the button on the handset.

Relieving your pain
Pain relief is provided by a volume of a strong painkiller (morphine or oxycodone) into your bloodstream. As soon as you feel pain you should press the button on the handset. It will start to work within minutes.

The machine is set to deliver a small amount of painkiller each time you press the button. It will not give you another dose until five minutes have passed. Hence, you are very unlikely to overdose yourself as a result of using this machine.

To make the best use of PCA it is advisable to press the button about five minutes before moving such as sitting up in bed, getting out of bed, deep breathing, or if you expect to cough.

You can use as much or as little as you want. When the effect of the painkiller wears off, you will need to keep giving yourself doses to remain comfortable. If you are still in pain, let the nurses know so they can adjust the amount of pain relief.

Occasionally the PCA can be set to deliver small amounts of painkiller continuously, so you can receive painkiller whilst you are asleep. This is usually done for patients who are already used to taking strong painkillers. You will still be able to press the button to deliver extra painkiller if needed.
You will not normally need injections for pain relief while using PCA.

If you are using the PCA for pain control after an operation you will normally use the PCA machine for about two days or until you feel able to take fluids by mouth and swallow tablets. After this time, if you continue to feel pain we can give you pain relief, usually as tablets. The nurses will discuss this with you.

If you are using the PCA for non-surgical pain such as mucositis, you can use the PCA until you are able to swallow normally or take tablets.

Other facts you might like to know
You should not feel any sensation when you press the button. If you do feel any discomfort in your arm please let the nurses know.

You may feel rather drowsy when you are having strong painkillers. This does happen sometimes. The nurses will check on this. Some people feel a bit sick and become constipated while having strong painkillers. If this happens please let the nurses know so they can give you some medication to help.

You may feel itchy on your face and chest. Tell your nurse and you may have some medication. This will stop as soon as you stop using the PCA.

The nurse or doctor will see you regularly after your operation to check your progress. They may ask you to score your pain on a scale from 0 to 10 (0 = none, 10 = worst ever). This is to help them assess how effective your pain relief is.

Contacts
If you have any questions you may in the first instance ask the nurses and doctors on the ward. Further assistance may be obtained from the acute pain nurse. Phone the hospital switchboard on 0161 446 3000 pager 12051 or 12567. If the pain nurse is not available, contact the critical care doctor on extension 3481.

Contacts for the pain team
Dr Julian Scott-Warren (Consultant in pain management and anaesthetics) 0161 446 8493
Dr Carel van Oldenbeek (Consultant in pain management and anaesthetics) 0161 918 7088
Shiji Thomas (Pain clinical nurse specialist) 0161 918 2153
Sarah Ghosh (Pain nurse specialist) 0161 918 2153
Eileen Hackman (Pain nurse specialist) 0161 918 2153
Andrea Rolland (Pain team secretary) 0161 446 8493

Some people are worried about using morphine as a painkiller. You cannot become addicted to morphine as a result of using this machine during the short period following your operation.
If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact patient.information@christie.nhs.uk

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