Multimodal Therapy for Postoperative Pain Management

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Implications for Nursing Care

Nurses can advocate for their patients with unresolved postoperative pain that is on a single analgesic agent. The nurse can accomplish this by promoting multimodal therapy such as adding opioid medication to help control pain safely.

Systems that develop protocols for using the multimodal approach for postoperative pain management will impact patient satisfaction and promote patient safety. Adopting these methods of multimodal therapy for pain relief has also shown to improve cost savings when compared to traditional practices (Parvizi & Roessler, 2013).

Studies have shown that implementing multimodal pain management improves pain relief during hospitalization stay, improves patient satisfaction at discharge, and reduces total opioid consumption in the long term (Kang et al., 2013). The non-pharmacological aspect to multimodal therapy is very important. Patients should have relaxation available to them pre and postoperatively to help alleviate anxiety and reduce pain throughout their hospital stay. In addition to less pain and anxiety, these patients also benefit from lower blood pressure and promotion of sleep (Lee, 2012). Hospitals should promote complementary therapy programs to assist patients in their recovery by offering various relaxation therapies to stress and pain. Nursing can take the lead in providing these non-pharmacological therapies at the bedside.

Conclusion

In summary of all these concepts, reducing pain postsurgery and controlling the stress response will allow for early and aggressive recovery activities for the patients. Focus on the environment that will allow for the lowest dosing of opioids and use no opioid combinations such as NMDIs, antidepressants, local anesthetics and relaxation techniques. Highlighting that multimodal analgesia will result in greater pain relief than any single analgesic agent. The importance of early initiation of multimodal therapy approaches for pain control is also recommended to aid in the prevention of persistent postoperative pain (Pasero & McCaffery, 2011).

Pain has multiple underlying pathways and mechanisms, a multifaceted phenomenon. Research clearly points to the use of multimodal therapy to best control postoperative pain, however the majority of providers do not specialize in this training, needing to individualize this best practice for their patients. The importance of using a multimodal approach to manage all types of pain should be the standard not the exception.