



# <u>Discharge Instructions for Pain Management</u> Anorectal Surgery

It is normal to have some discomfort after your operation. During your operation, local freezing and pain medication were given to help with this. Your pain will improve day by day.

#### **Activity and Lifestyle:**

- A small amount of bloody discharge from the rectal area is normal after surgery.
- You may experience discomfort when passing a bowel movement.
- Sit in a bathtub with warm water 2 or 3 times per day for 20-30 minutes for the first week after surgery. You may use Sitz baths or add Epsom salts, but this is not necessary.
- Avoid straining or lingering on the toilet.
- You may return to work when you are able to do so, unless you were given specific instructions by your surgeon on when to return to work.

### **To Prevent Constipation:**

- Drink 6-8 glasses of water every day.
- Increase your intake of high fibre foods, such bran, whole grains, vegetables, and fruit.
- Take a fibre supplement, such as Benefibre, Metamucil, or bran cereals.
- Use your stool softener as prescribed. You may also take a non-prescription laxative, such as PEG, Milk of Magnesia or Colace.

## **Medication Instructions**

Please take your medications with milk or food and follow all the instructions given to you by your pharmacist.

## First 3 days (72 hours) after surgery:

- 1. Meloxicam 7.5 mg (Mobicox): Take 1 tablet orally, every 12 hours, for 3 days (prescription).
- 2. Metronidazole (Flagyl) 500 mg: Take 1 tablet orally twice a day, for 5 days (prescription).

- 3. Acetaminophen 500 mg (extra-strength Tylenol): Take 1-2 tablets orally, every 6 hours, for 3 days (over the counter).
- 4. PEG (Lax-a-day, Pegalax, PEG 3350): Take 17 g (~ 1 heaping tablespoon) in 240 mL (8 ounces/1 cup) of water orally, once to twice daily to avoid constipation. You may also use Milk of Magnesia or Docusate (Colace) orally, once to twice daily, as instructed by your surgeon (over the counter).

To maximize your pain relief, it is recommended that you take all of these medications.

\*\*If you do not have drug coverage for Meloxicam, you may substitute the following over-the-counter medication: Naproxen 200 mg (Aleve): Take 2 tablets orally, every 12 hours, for 3 days.

#### After 3 days (72 hours):

- 1. Continue Acetaminophen 500 mg (extra-strength Tylenol) 1-2 tablets every 6 hours as needed.
- 2. Ibuprofen (Advil) 400 mg: Take 1 tablet orally, every 6 hours, as needed.
- 3. Continue stool softeners if you need them.

This medication plan should relieve most of your discomfort. 90% of patients will have good pain control and will not require anything stronger.

You will be given a prescription for a stronger pain medication called **Tramadol**. DO NOT FILL THIS PRESCPTION. Only fill it if the other medications do not control your pain.

\*\*If you do not have coverage for Tramadol, then Codeine 30 mg may be prescribed.

Please notify your surgeon if you have a history of Stomach ulcers, Liver disease, Kidney disease or Allergies to any of these medications.

## **Medication Disposal**

It is very important to dispose of leftover medication appropriately.

Please return any leftover prescription medications to your pharmacy or bring them to your follow up appointment.