

Opioid analgesia following Caesarean Section

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BACKGROUND

- Post operative pain after LSCS is a common problem
- NICE guidance states that only 15-30% of these women do not require opioids.
- Poorly managed pain leads to delayed recovery, chronic pain and inability to fulfil essential caregiving responsibilities

METHODOLOGY

- In NNUH, opioid prescription rate was found to be low in November 2023
- We tried to improve the compliance by education of midwifery team
- This was also presented in Anaesthetic and Obstetric Governance meeting
- A re-audit was performed in November 2024,
- The results are presented in this poster.

DISCUSSION

- This audit demonstrates that educational interventions can improve prescription compliance and thus, improve patient experience
- This is a complex process and requires continuous and multidisciplinary interventions

WHAT NEXT?

- Improving patient awareness – posters in antenatal clinic and postnatal ward.
- Regular teaching for Obstetric Residents and Midwifery team
- To liaise with pharmacy and introduce postoperative prescription templates on electronic prescribing systems.
- To arrange for pre-packaged discharge packs on the post-natal ward to enable rapid dispensing of drugs.

REFERENCES

- "Caesarean Birth Guidance, 2021," National Institute for Health and Care Excellence, 31 March 2021. [Online]. Available: <https://www.nice.org.uk/guidance/ng192>.
- T. Clarke, "Birth Trauma Report," APPG, 13 May 2024. [Online]. Available: <https://www.theo-clarke.org.uk/birth-trauma-report>.

Nov 2023

77 LSCS

Opioids prescribed on discharge - 3

Remaining 74

2 re-admission for pain management

Midwifery education

Presentation in Governance Meeting

Nov 2024

89 LSCS

Opioids prescribed on discharge - 15

Remaining 74

No readmission

2 referred to GP

14 reported moderate / severe pain

3 were taking OTC codeine