Women’s and Children’s Services

Pain relief during pregnancy and after birth

This leaflet has been written to give you a general understanding of some of the medications prescribed for antenatal and postnatal pain relief. It contains brief information about how you take the medication, the possible side effects and the safety of medications during pregnancy and/or breastfeeding.

You may take other medication that is not written about in this booklet. Remember, everyone is an individual and your drug therapy may differ from other patients. Your medication has been specifically prescribed to cater for your medical needs. The information given in this booklet is intended as general guidance and is limited. If you have been given different advice by a doctor, follow the doctor’s advice.

The doses in this leaflet are recommended doses for adults and adolescents (>12 years of age) and are not suitable for children.

General advice

- Always keep medication out of the reach of children.
- Do not let anyone else take your medication.
- Do not take medication that has been prescribed for someone else.
- Keep all your medication in the original containers.
- If you suffer any unpleasant side effects from your medication, speak to your doctor/midwife/pharmacist.
- Inform your midwife if you start a new medication whilst pregnant or breastfeeding.
- Always read the information leaflet provided with each newly prescribed medication.

It is not unusual to require some form of pain relief after giving birth, so please make sure you have enough pain relief available at home after you are discharged from hospital. The most commonly used painkillers paracetamol and ibuprofen are widely available without prescription. If, at the time you are discharged from hospital, you need alternative pain relief that is only available on prescription, you will be supplied with a small supply to take home. Always contact your midwife if any pain does not settle within a week after delivery or if the pain gets worse.
**Paracetamol**

Paracetamol is a commonly used pain killer in pregnancy and after delivery. Paracetamol works by relieving pain and reducing high temperature and fever. It can provide effective relief from mild to moderate pain including: headache, toothache, sore throat, aches and pains, symptomatic relief of rheumatic aches and pains, influenza symptoms and feverishness. It is widely available in pharmacies and supermarkets without the need for a prescription. For painful conditions, such as the pain following child-birth, a pharmacist may sell more than 32 paracetamol tablets at his/her discretion (but not more than 96).

**How should I take it?**

Paracetamol can be taken regularly or when required for pain. If you are prescribed a number of pain killers, it is usually recommended to take your paracetamol regularly to obtain the maximum benefit and to limit the number of other painkillers you may need.

**Dosage:** Two 500mg tablets (total 1g) every four to six hours as required.

**Do not** take more than eight tablets of 500mg in a single day (24 hours).

The tablets should be taken with water, leaving at least four hours between each dose. After delivery you may need to take paracetamol regularly for a few days. As the pain settles, take only as much as you need to relieve your symptoms.

**What are the side-effects?**

Paracetamol is generally well tolerated.

**Is it safe to take this medication during pregnancy and/or breastfeeding?**

Paracetamol is commonly used in pregnancy and during breastfeeding with very few safety concerns.

**Ibuprofen**

Ibuprofen is a non-steroidal anti-inflammatory drug (NSAID) and is used to treat inflammation in a variety of conditions, including pain associated with injury. It is commonly used after caesarean section. It is widely available in pharmacies and supermarkets without the need for a prescription, although doses on packs bought in a pharmacy will describe doses that are lower than described in this leaflet. This is because this is a safer way for people to take ibuprofen without further investigation by a doctor.

Ibuprofen is similar to aspirin, and must not be taken with aspirin without advice from your doctor/pharmacist/midwife.

**How should I take it?**

Swallow the tablets with a glass of water. If possible take the tablets with or after food.
Dosage:
The usual dose is 200-400 mg three times a day with or after food (if possible), as required. The tablets should be taken with water. Take only as much as you need to relieve your symptoms.

Particularly after caesarean section or assisted delivery, you may need to take ibuprofen (400 mg three times a day) as well as paracetamol regularly for a few days. Do not take more than 1200mg in 24 hours without medical advice.

Who may ibuprofen not be suitable for?
Patients with any of the following conditions should consult a doctor/midwife/pharmacist before taking ibuprofen:

- Asthma/breathing problems.
- Previous stomach ulcer.
- Previous reaction to aspirin, ibuprofen or other non steroidal anti-inflammatory drug.
- Other medical conditions: for example kidney disease, heart disease, blood clotting disorders, liver disease.

What are the side-effects?
Common side effects include headache, dizziness, feeling sick and diarrhoea.

Is it safe to take this medication during pregnancy and/or breastfeeding?
Avoid ibuprofen in pregnancy. It should only be used in exceptional circumstances if specifically advised by your obstetrician. Ibuprofen is considered to be safe in breastfeeding.

Diclofenac
Diclofenac is also a non-steroidal anti-inflammatory drug (NSAID), like ibuprofen. It is commonly given as a single dose immediately after caesarean section, as it is the only NSAID that can be given as an injection or rectally. You will usually be offered ibuprofen instead of diclofenac as soon as you are able to swallow, as ibuprofen taken at the right dose is equally effective.

The most common side-effects and safety warnings are the same for diclofenac and ibuprofen, but there is a slightly increased risk of heart disease with diclofenac.

Dihydrocodeine
Dihydrocodeine is used for the relief of moderate pain. It is usually recommended for patients who do not have adequate pain relief despite paracetamol and ibuprofen or for people who are likely to have severe pain.
Sometimes, dihydrocodeine is recommended to be used with paracetamol instead of ibuprofen, if there is a medical reason why you can’t have ibuprofen.

**How should I take it?**

Dihydrocodeine can be taken when required or regularly, depending on the level of pain you are experiencing. **Do not drink alcohol while you are taking dihydrocodeine.**

**Dosage:**

30-60 mg up to four times a day when needed. You may need to take dihydrocodeine regularly to control the pain effectively for a few days after caesarean section or assisted delivery; however you should aim to take only as much as you need to relieve your symptoms as soon as you feel well enough.

**What are the side-effects?**

The most common side effects with dihydrocodeine are drowsiness, constipation, feeling sick and dry mouth. You will need to take laxatives regularly to prevent and/or relieve constipation when you are taking dihydrocodeine.

**Is it safe to take this medication during pregnancy and/or breastfeeding?**

Use of dihydrocodeine during pregnancy for pain relief can be justified where paracetamol has not been effective. This should be prescribed by a doctor.

Dihydrocodeine can be used with caution during breastfeeding, assuming baby is born term and is well. Use the minimum effective dose for the least amount of time possible.

**Morphine sulfate oral liquid (Oramorph®)**

Morphine sulfate is used for the relief of moderate to severe pain. You may be prescribed morphine sulfate if alternative pain relief mentioned in this leaflet is not sufficient for the management of your pain.

**How should I take it?**

Oral morphine sulfate is a solution. It should be drunk and then if necessary followed with another drink of water/squash if the taste is unpleasant.

**Dosage:**

The dose prescribed will be tailored to your individual needs. The usual dose when you are first prescribed morphine sulfate is 5-10mg when required.

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**Warning Dihydrocodeine and Morphine**

If you are breastfeeding whilst taking dihydrocodeine or morphine sulfate (Oramorph), **inform your midwife immediately** if your baby shows signs of drowsiness, difficulty feeding, breathing problems or anything else unusual.

Some babies may be more sensitive than others to the side effects of these medicines and you may be advised to stop taking these medicines if necessary or reduce the dose.

Your midwife/doctor/pharmacist can give you further information or advice if required.
You are unlikely to need regular morphine sulfate at any time during your pregnancy or after delivery.

**What are the side-effects?**

The most common side effects with morphine sulfate are drowsiness, constipation, feeling sick and dry mouth. You will need to take laxatives regularly to prevent and/or relief constipation when you are taking morphine sulfate.

**Is it safe to take this medication during pregnancy and/or breastfeeding?**

Use of morphine sulfate after delivery can be justified where alternative pain relief (paracetamol, ibuprofen, dihydrocodeine) has not been effective. It should be prescribed by a doctor.

Morphine sulfate can be used with caution during breastfeeding, assuming baby is born term and is well. Some morphine can cross into the breast milk. Your child will not become addicted to morphine, but large doses taken by the mother can make a nursing infant sleepy and may cause problems with feeding. Use the minimum effective dose for the shortest time possible.

**Contacts/Further information**

Antenatal clinic: 01223 217657
Medicines Information department: 01223 217502

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We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site.
For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

**Help with this leaflet:**

If you would like this information in another language, large print or audio format, please ask the department to contact
Patient Information: 01223 216032 or patient.information@addenbrookes.nhs.uk

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**Document history**

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