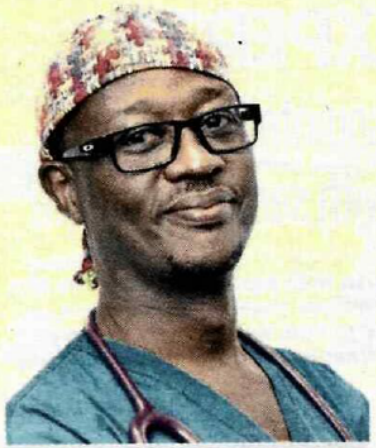
Pain after surgery: Is it avoidable?



SURGEON'S CORNER

DR MOSES GALUKANDE

When Akot woke up after her abdominal surgery, the first thing she noticed was a dull ache across her stomach. A nurse leaned over and asked a simple question: "On a scale of zero to 10, how painful is it?"

For many patients, this moment is one of the most memorable parts of the surgical journey. The fear of pain is often greater than the fear of the operation itself. Yet pain after surgery is not simply suffering, it is also the body's way of signalling that healing has begun.

Understanding surgical pain, why it occurs and how it can be controlled can make recovery easier and far less frightening.

WHAT EXACTLY IS SURGICAL PAIN?

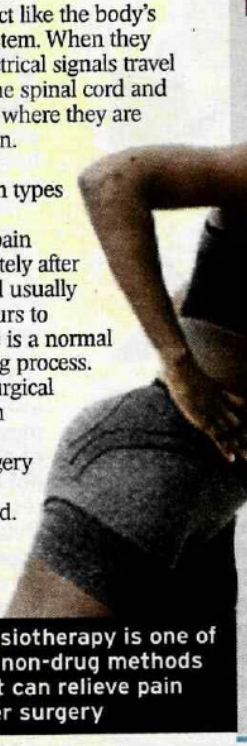
Surgical pain refers to the discomfort that results from tissue injury during an operation. We (surgeons) must pass through layers of skin, muscle and sometimes internal organs to reach the area that needs treatment. During this process, tiny sensors in the body detect the injury and send signals to the brain.

These sensors act like the body's internal alarm system. When they are triggered, electrical signals travel along nerves to the spinal cord and then to the brain, where they are interpreted as pain.

Doctors usually describe two main types of surgical pain.

Acute surgical pain appears immediately after the operation and usually lasts for a few hours to several days. This is a normal part of the healing process.

Chronic post-surgical pain occurs when pain persists for months after surgery even though the wound has healed. Fortunately, this affects only a minority of patients, although certain operations such as breast surgery, amputations, or hernia repairs carry a higher risk.



Physiotherapy is one of the non-drug methods that can relieve pain after surgery

HOW COMMON IS PAIN AFTER SURGERY?

Pain after surgery is extremely common. Studies from most populations suggest that up to 70% of patients experience moderate to severe pain during the first few days after an operation.

Most of this discomfort gradually improves as healing occurs. However, about 10–20% of patients undergoing certain procedures may develop longer-lasting pain.

In many parts of the world, particularly in low and middle income countries, surgical pain may be undertreated because of limited access to medications, shortages of trained staff, or persistent myths about pain treatment.

Improving pain management has, therefore, become an important priority in modern surgical care.

WHAT HAPPENS INSIDE THE BODY?

When tissues are cut or manipulated during surgery, the body launches a complex biological response.

First, specialised pain sensors in the injured area become activated. At the same time, the body releases chemicals that promote inflammation. These substances help start the healing process, but they also make the wound tender and sensitive.

This is why surgical wounds often feel sore, swollen, or warm during the first few days after an operation.

Sometimes nerves themselves may be irritated or injured during surgery. When this happens, the pain may feel different; burning, tingling, or electric in nature. We refer to this as neuropathic pain (nerve pain).

MEDICINES

Doctors often combine several medications depending on the mildness or severity of the pain.

Using different drugs together allows effective pain control while reducing side effects. Another powerful method involves temporarily blocking nerves that supply the surgical area. Examples include:

1. Spinal anaesthesia
2. Epidural anaesthesia
3. Nerve blocks in the arms or legs

These techniques can greatly reduce pain during and after surgery.

AT GLANCE

Pain after surgery is common, but it should never be ignored or suffered in silence. Advances in anesthesia, medications and surgical techniques mean that most patients today can recover far more comfortably than in the past.

Understanding surgical pain and knowing that it can be treated helps patients take an active role in their recovery.

Surgery may involve temporary discomfort, but with proper care, the pain is usually a short chapter.

NON-DRUG METHODS

Pain relief does not rely on medicines alone. Simple measures can also help: early gentle movement, breathing exercises, physiotherapy and proper positioning in bed. Even supporting the wound with a pillow while coughing can significantly reduce discomfort.

Pain cannot always be completely avoided, but it can often be reduced.

Many hospitals now give certain pain medicines before the operation begins. This approach known as pre-emptive analgesia reduces the sensitivity of pain pathways before the surgical injury.

Modern surgical techniques also help.

Minimally invasive procedures, such as laparoscopic surgery, use smaller incisions and usually cause less pain.

Patients themselves can also help by reporting pain early, taking medications as prescribed and following medical advice about movement and recovery.

A SURPRISING FACT ABOUT PAIN

Pain is not determined by injury alone. Emotions and expectations also influence how pain is experienced.

Studies show that patients who receive clear explanations and reassurance before surgery often report less pain afterward.

In other words, knowledge itself can be a powerful form of medicine.

3 MYTHS ABOUT SURGICAL PAIN

- Severe pain after surgery is normal and must be endured. Reality: Pain should be treated. Severe pain can slow recovery.
- Asking for pain medicine means you are weak. Reality: Good pain control helps the body heal faster.
- Pain medicines always cause addiction. Reality: When used correctly for short periods after surgery, the risk is extremely low.