

Pain Management After Total Joint Arthroplasty 1.6 www.aornjournal.org/content/cme

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Purpose/Goal

To provide the learner with knowledge specific to multimodal pain management for patients undergoing total joint arthroplasties (TJAs).

Objectives

1. Discuss how pain affects patients.
2. Discuss common approaches for postoperative pain management.
3. Describe the postoperative multimodal pain management protocol presented in this article.
4. Discuss the outcomes for patients using multimodal pain management.

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Lisa T. McDonald, MSN, FNP-C, CRNFA; Nicole C. Corbiere, MS; Jay A. DeLisle, PharmD, BCPS; Alexander Martin Clark, MD; and Laurel Kuxhaus, PhD, have no declared affiliations that could be perceived as posing potential conflicts of interest in the publication of this article.

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ABSTRACT

Controlling pain after total joint arthroplasty (TJA) is critical to minimizing complications, decreasing costs, and expediting patients' return to function. We implemented a TJA multimodal pain management protocol at a Level III trauma center in a small, rural community in New York. We retrospectively reviewed 266 patient charts and collected patient demographics, pain management information, and discharge data. Our primary goals were to quantify the total number of narcotic medication doses used and length of hospital stay. The multimodal pain management protocol significantly reduced the number of narcotic doses used ($P < .01$). Hospital length of stay decreased slightly; although not statistically significant ($P = .25$), this may be clinically significant. Gender, age, and type of arthroplasty (ie, knee, hip) were not significant factors. A multimodal approach to pain management after TJA can reduce narcotic use and hospital length of stay, thereby also reducing the incidence of side effects from narcotics. *AORN J* 103 (June 2016) 606-613. © AORN, Inc, 2016. <http://dx.doi.org/10.1016/j.aorn.2016.04.003>

Key words: *multimodal pain management protocol, total joint arthroplasty/replacement, pain management techniques, lower extremity, postoperative pain.*

Pain management after total joint arthroplasty (TJA) is challenging but worthwhile because well-managed pain improves patient outcomes. The wide variety of postoperative pain management protocols and the lack of an identified "gold standard" suggest that there is room for improvement in the standard of care.

DESCRIPTION OF THE PROBLEM

Inadequate pain management affects recovery time and patient satisfaction, delays rehabilitation efforts, and can ultimately compromise patient outcomes and return to function.¹⁻⁴ Beyond the physical discomfort and mental distress that patients experience as a result of pain, untreated pain also can lead to postoperative complications.⁵ For example, pain reduces the ability to take deep breaths and cough, which

can cause lung problems (eg, pneumonia). Patients also can experience

- increased anxiety,
- sleep disruption,
- decreased mobility,
- decreased satisfaction, and
- slower recovery.⁵

After undergoing TJA, the patient's peripheral and central nervous systems magnify pain as a result of the secondary inflammation response to surgery.⁶ Pain stimulates the sympathetic nervous system, which can increase blood pressure and heart rate and may place patients at a higher risk for heart complications.⁷ Pain can decrease appetite and prolong the need for bed rest, and the stress response to

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