

Initial treatment: Non-Opioid pain relief

The most commonly known medication in this category is Paracetamol. Although it can be taken only as needed, we strongly advise that radiation therapy patients take this medication regularly every four to six hours, as this is proven to be the most effective way to control pain with Paracetamol.

Escalated treatment: Opioid pain relief

When pain becomes increasingly worse and difficult to manage, your doctor will prescribe you a stronger type of pain relief. It is important to get on top of pain before it becomes uncontrollable; therefore your doctor is likely to prescribe a strong opioid medication such as Morphine. You may be prescribed a combination of long-acting and short-acting pain relief medications, in order to provide effective pain management.

- Long-acting opioids are usually taken morning and night, and provide a slow release of pain relief over a 12 hour period.
- Short-acting opioids can be used in between long-acting opioids to treat breakthrough pain as necessary. Depending on dosages, some can be taken more often than others.

This should be taken as prescribed by your doctor.

Useful numbers

- Waikato Hospital switchboard
07 839 8899
- Oncology nurses
Ext: 96803
- Head and Neck Nurse Specialist
Ext: 23031
- Oncology Outpatient Reception
07 839 8604

For more information please visit the following website:

<http://www.who.int/cancer/palliative/painladder/en/>

Mouth care and pain management information of oral side effects for patients receiving external beam radiation therapy to the head and neck region



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Waikato Regional Cancer Centre



This information brochure provides an explanation of the appropriate mouth care and pain management to lessen/treat side effects from head and neck radiation therapy.

The most common side effects of head and neck radiation therapy are; mucositis, dry mouth (xerostomia), difficulty eating / drinking and swallowing, and weight loss.

Mouth care

Mouth care plays a vital role in keeping your mouth clean, and reducing pain throughout your treatment. Mouth washes, regular brushing of teeth and the use of lip-conditioners will help with this, in addition to sipping water regularly.



Mouth wash	What is it for?	Directions
Salt and Baking Soda	This mouth wash will help you to maintain a clean mouth, which also helps to reduce pain. You can make this yourself at home.	Mix: ½ teaspoon Salt, ½ teaspoon Baking Soda, and ½ glass of warm water. Rinse after meals and more frequently as necessary – up to every hour if required.
Difflam C	This has an anti-inflammatory effect and helps to reduce pain and numb the mouth slightly. This should be used in addition to the Salt and Baking Soda mouthwash.	Rinse with 10mls of Difflam for one minute and then spit out. Rinse after meals and more frequently as necessary – up to every hour if required.
Nilstat drops	Useful for preventing and treating fungal infections that may occur in the mouth during radiation treatment (e.g. thrush). It comes in a bottle form with a marked syringe tip for administering the appropriate dose into the mouth. Nilstat should be used following other mouth washes, not before .	Shake the bottle before use. Use the marked syringe to measure 1-2mls of Nilstat solution (depending on what your doctor prescribes), and squeeze the top to drop the solution into your mouth onto your tongue. Swish the Nilstat around the mouth for as long as possible before swallowing.
Xylocaine Viscous	This can be used to numb the mouth and throat.	It is to be used as directed by your radiation oncologist in the event of severe pain if deemed appropriate and safe.

Other tips for mouth care:

- Brush your teeth at least twice daily with a soft-bristled brush and mild toothpaste, being careful not to irritate the lining of the mouth and gums. If using a toothbrush becomes too difficult or painful, talk to your nurse about using mouth swabs/sponges instead.
- Throughout treatment it is important to keep the mouth moistened, to prevent it from drying out and ulcerating. This includes keeping the lips moistened with lip balms/conditioners. Initially, any product may be beneficial, but during treatment if the skin becomes broken / cracked, you should transition to using a more basic, moisturising product such as Lip-Eze Peppermint Balm, paw-paw ointment, or a plain, paraffin based ointment.

Pain relief



Keeping your pain under control will make a huge difference to your treatment journey!

Unfortunately pain is expected to worsen throughout treatment - therefore it is very important to keep your doctor or nurse informed of the level of pain you are experiencing, and ensure you are using your pain relief as directed. When asked to describe your pain, your doctor or nurse may ask you to rate your pain on a scale of 0-10 according to severity; this is an easy way to communicate pain and gauge whether it is improving or worsening, and will help to guide what pain relief is prescribed to you by your doctor.

Pain relief will be prescribed according to your needs, and you will be told the best way of how to take this medication by your doctor. An important thing to remember is that with an increased strength of pain-relief comes an increased risk of side effects; therefore it is important you have these explained to you by your nurse or doctor.