

Enhancing Your Recovery After Surgery



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Use of common medications combined with cold therapy (ice therapy) and simple easy movement can reduce or eliminate your need for narcotic medication.

The 5 elements of the Opioid Sparing pathway:

- 1.) Mental relaxation and stress reduction prior to surgery.
- 2.) Local or regional anesthesia on the day of surgery.
- 3.) Full use of safe non-addictive medications to reduce inflammation and the brain's response to pain.
- 4.) Cryotherapy/Cold therapy/ice therapy to reduce inflammation and pain signals.
- 5.) Early mobilization to stimulate muscle recovery and joint fluid production.

Acetaminophen Extended Release (ER) 650mg (also called Tylenol): Acts at the brain to reduce the response to pain signals transmitted to the brain. This drug is an analgesic.

Meloxicam 15mg (also called Mobic, Vivlodex, Metacam): Acts by blocking the production of inflammation enzymes called prostaglandins. Pain is caused by prostaglandins that are stimulated after surgery. This drug is a non-steroidal anti-inflammatory drug (NSAID)

Cryotherapy (also called Cold Therapy or Ice Therapy): Reduces swelling and inflammation by preventing increased blood flow and increased prostaglandins from reaching the surgical area; dampens nerve transmission of pain.



Early Gentle Mobilization of the Joint: Stimulates joint fluid production to lubricate the joint; helps muscles relax from any spasm caused by surgery by decreasing compression on the joint; stimulates normal blood flow to muscles and the joint to clear away inflammation and swelling.



Use all of these treatments to enhance your recovery after surgery.

Follow the guidelines below to be successful with the Opioid Sparing Pathway:

Post-surgery: Days 1 through 4

Acetaminophen ER: 1300mg by mouth 3x's/day
(no more than 4000mg/day)

Meloxicam: 15mg by mouth 1x/day at the same time every day

Tramadol: 50-100mg by mouth every 4-6 hours as needed for increased pain.
(no more than 8 pills per day)

Post-surgery: Days 5 and on

Acetaminophen ER: 650mg to 1300mg by mouth 3x's/day
(no more than 3000mg/day)

Meloxicam: 15mg by mouth 1x/day

Tramadol: 50-100mg by mouth every 4-6 hours as needed for increased pain.
(no more than 8 pills per day)

Important cautions:

- Use the Acetaminophen and Meloxicam as your primary pain medications and only add Tramadol if needed.
- If you do not have pain, you do not have to take the medications.
- You may use another NSAID (Advil, Motrin, Aleve) as an alternative to Meloxicam; however, DO NOT use with Meloxicam.
- Acetaminophen is processed through the liver. If you have liver disease do not take acetaminophen at all.
- If stomach upset occurs with Meloxicam, try taking it with food or milk. If upset continues, please discontinue use.
- If you have known allergies to Acetaminophen or Meloxicam or any medications in the NSAIDS group, do not take these medications.
- Avoid alcohol while taking these medications. Alcohol can increase the negative side effects to the liver and increase your risk of stomach bleeding.

Contact my office if there are any concerns, comments or questions.

Wishing you a speedy enhanced recovery,
Dr. Roache