

# Total Hip replacement: Enhanced Recovery Analgesia Guidelines

On admission prescribe <b>all pre-hospital analgesia</b> (including opioid patches) – unless contraindicated
<b>Single dose of slow release opioid in the evening on day of surgery</b> i.e. 5mg MST   <b>Avoid PCA/MR opioid following intrathecal morphine</b>
<b>Paracetamol</b> 1 gram 4–6hrly (PO/IV) max 4 grams in 24 hrs - reduce dose to 500mg QDS if patient weighs ≤50kg – consider PO pre-operatively
<b>INTRAOPERATIVELY</b> use <b>opioid sparing techniques</b> (unless contraindicated)
<b>Recovery:</b> administer analgesia as per ‘opioid sparing analgesia in Recovery’ guidelines

Age < 65 years & normal renal function	Age > 65 years age & normal renal function	Abnormal renal function
↓	↓	↓
<b>Ibuprofen</b> 400mg PO TDS OR <b>Naproxen</b> 500mg PO BD if no contraindications  <b>Morphine (IR)</b> 5 - 20 mg 2 hourly PO PRN lowest effective dose - monitor renal function  IF intractable side effects* with morphine switch to <b>Oxycodone (IR)</b> 2.5 - 10mg 2 hourly PO PRN	<b>Avoid NSAIDS &amp; slow release opioids</b>  <b>Morphine (IR)</b> 2.5 - 10 mg 2 hourly PO PRN lowest effective dose - monitor renal function <b>Age&gt;85: Morphine (IR)</b> 2.5-5 mg 4 hourly PO PRN  IF intractable side effects* with morphine switch to <b>Oxycodone (IR)</b> 1.5 - 5 mg 2 hourly PO PRN <b>Age&gt;85: Oxycodone (IR)</b> 1.5-2.5 mg 4 hourly PO PRN	<b>Avoid NSAIDS &amp; slow release opioids</b>  <b>eGFR 30 - 60</b> <b>Morphine (IR)</b> 2.5 - 5mg 4 hourly PO PRN IF intractable side effects* with morphine switch to <b>Oxycodone (IR)</b> 1.5 - 2.5mg 4 hourly PO PRN <b>IF eGFR &lt; 30</b> Consider <b>oxycodone (IR)</b> 1.5 - 2.5mg 4 hourly PRN  Consider <b>Fentanyl PCA</b> for dialysis patients
<b>Naloxone</b> 100 - 400 micrograms IV PRN prescribed for opioid respiratory depression following algorithm (Click <a href="#">here</a> for Naloxone guideline)		
<b>Consider Gabapentin if evidence of neuropathic pain but use low dose; monitor renal function and stop if side effects** not tolerated</b>		
<b>Anti-emetics:</b> Please prescribe as per <a href="#">PONV guideline on microguide</a>		
<b>Laxatives:</b> Senna 15mg BD PO PRN; Macrogol 3350 up to 3 sachets per day PO PRN <a href="https://viewer.microguide.global/BSUH">https://viewer.microguide.global/BSUH</a>		
<b>Review analgesic requirements daily</b> - if pain is still an issue bleep the <b>Acute Pain Team</b> or <b>on call anaesthetist out of hours</b>		
*Morphine side effects: respiratory depression confusion, hallucinations, sedation, Nausea and Vomiting, itching		**Gabapentin side effects: sedation, hallucinations, dizziness, tremor *** Co-morbidities: Frailty, dementia, previous ADRs, <b>avoid if age&gt;75 years</b>
<b>Prescribe limited supply of opioids and anticonvulsants with TTOs (if needed) and instruct GP to manage risk of long term dependence</b>		