

Limitations

Medicines that help with chronic pain generally cannot get rid of all painful sensations, but there are other things we can do to help ourselves. This is sometimes called pain self-management. The following may help with the type of pain lidocaine plasters/patches are used to treat:

- Wearing loose/cotton clothing
- Applying a protective layer to protect sensitive areas
- Frequent application of cold packs, unless this causes pain

There are also free pain self-management support groups through Better Days and Versus Arthritis. These are for patients with all types of long-term chronic pain.

You can refer yourself to these groups. For further information see:

<https://online.hscni.net/our-work/pharmacy-and-medicines-management/patient-initiatives/long-term-pain/>

Other helpful websites include

<https://livewellwithpain.co.uk/>

<https://www.flippinpain.co.uk/>

If you have any questions, please contact your GP practice.

It is very important that you read the patient information leaflet in the pack carefully, as it gives you helpful advice on how to prepare your skin before using Lidocaine plasters/patches, plus how to cut and apply the plasters/patches.



HSC Health and Social Care



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Lidocaine plasters/patches

Your practice has given you lidocaine medicated plasters/patches to help you with pain.

About Lidocaine plasters/patches

The plaster/patch works in two ways. It contains a drug called lidocaine, which is a local anaesthetic. This passes into your skin via contact with the plaster/patch, hopefully reducing pain in that spot. The plaster/patch acts as a barrier to protect the painful area.

You can wear it during the day or night, depending on when your pain is worse.

The plaster is quite large and can be cut to size to fit the sore area. You may find that you can get more than one 'dose' from one plaster/patch.

How will I know if it's working?

You will know within 2-4 weeks if the plaster/patch is working for you. Signs may include:

- ✓ You have less pain. The pain may not go away completely.
- ✓ You sleep better and/or you are able to do more.

It's working, what now?

Treatment should be reassessed at regular intervals to decide whether the amount of plasters needed to cover the painful area can be reduced, or if the plaster-free period can be extended.

Let your practice know if you would like to try either of these. For example, you may be able to wear your plaster for 11 and a half hours and keep it off for 12 and a half hours, then 11 hours on and 13 hours off. etc.

Over time, you use the plaster/patch for shorter and shorter periods until you may no longer need it.

Taking a break

At some point you or your prescriber may want to check what is it about the plaster/patch that is helping you - the drug or the barrier.

To do that, you may be asked to stop using the plaster/patch for a short period of time you can use something else as a barrier to protect the area, depending on where it is e.g. a non-medicated dressing or a suitable alternative.

If the pain or your sleeping pattern doesn't change and you can move and function as before, it's probably the 'barrier' protection that is helping you, not the drug and you will be able to stop using the plasters/patches.

If the pain returns, or you can't sleep or move as you did while using the plasters, you and your prescriber will know it is likely the lidocaine in the plasters that helps you. You will probably start using them again, bearing in mind the points above about reducing use over time.

If you do have a break in using the plasters/patches, remember to let your practice know the result so they can decide on the best way forward with your treatment.

It's not working, what now?

If the plaster/patch is not working after 4 weeks, it's important that you stop using them.

Do not order another prescription. Let your doctor know that it's not working so they can make a note in your record.