# LIAMMOORE

ORAL AND MAXILLOFACIAL SURGEON

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# **Prescription Medication Information**

It is common to be prescribed medications after a procedure. This document is a short summary of each medication some of which you will have been prescribed. Not all medications on this list will be included in your script as each prescription is tailored to your needs.

#### Antibiotics

**Amoxycillin:** A form of penicillin often taken 3 times a day and ideally with food. All antibiotics can upset your bowels causing diarrhoea or loose bowel motions. This is a common adverse reaction and not an allergy.

**Clindamycin:** An alternative to amoxycillin for those who have an allergy. It is routinely prescriber at 150-300mg four times per day.

**Metronidazole:** This antibiotic is rarely used by itself but often in conjunction with Amoxycillin. It is very affective at killing bacteria that exists in an oxygen free environment (Deep infections) and those that have persisted despite standard antibiotic therapy. This medication reacts with alcohol and can cause severe abdominal pain. Please do not consume alcohol while taking this antibiotic.

## Analgesia (Pain Relief)

**Paracetamol:** Is a form of anti-inflammatory that works both within the brain (centrally) and at the site of surgery (peripherally). It is very safe when used as instructed (maximum 4 grams per day). It should be used routinely for the first 7 days after surgery even if you initially don't have pain. Staying on top of your pain is much easier than trying to regain control. For this reason almost all patients are prescribed paracetamol.

**Ibuprofen:** Is a form of anti-inflammatory that works peripherally (at the site of surgery). It should only be taken regularly for 3 days after your surgery and always with food. It prevents the production of prostaglandins which are responsible for dilating blood vessels and sensitising nerves. These properties are important in the first 3 days after surgery, as peak inflammation occurs 48-72hrs postoperatively. By taking this medication regularly, this peak will be lower, meaning less pain and a faster recovery. Unfortunately, the same prostaglandins are important in protecting your stomach from the natural acid used for digestion. Some people are sensitive to ibuprofen and this is the most common medication to cause stomach upset, nausea and the inability to keep food down. If this occurs to you please stop taking this medication immediately and contact Dr Moore on **0272 258 350**.

**Codeine Phosphate:** Is used for when paracetamol and/or ibuprofen are simply not enough to keep you comfortable. It is a precursor to morphine and only a small percentage of it is converted to the active form by the liver. Some patients can NOT convert codeine to the active form. If this medication doesn't help relieve pain, please contact Dr Moore on **0272 258 350**.

**Tramadol:** Is a strong pain reliever that works in the brain. It can cause sedation, sleepiness and can alter your capacity to make important decisions. It is used for strong pain relief and should only be taken when necessary. Patients who also take anti-depressants (SSRI) should not take this medication.

## Mouth Wash

**Chlorhexidine:** Chlorhexidine is the active ingredient of choice in a mouthwash (Savacol) for reducing the bacterial load in the mouth and minimising the risk of infection. It can be used pre-operatively and post-operatively. It is excellent at maintaining impacted wisdom teeth causing pain until they are removed. Often a small MONOJET syringe will be supplied to assist in rinsing under the soft tissue of a wisdom tooth or into sockets where wisdom teeth once were. The regular use and volume of mouthwash is more important than the pressure used to clean.