

# YOUR GOOD HEALTH

## Pushing through the pain

Opioid alternative helps new moms recover from C-sections

The "pain ball" is becoming popular with women who have C-sections.

[MARC KOVAK/DISPATCH]

By Marc Kovac  
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**K**atrina Bowman has dealt with a lot in her 16 years as a surgery nurse. So when her blood pressure started rising one day last year, about seven months into a pregnancy that had included severe preeclampsia, she knew it was time to call the doctor and get things checked out.

Her daughter, Kinley, was delivered via cesarean section a short time later, about two months earlier than expected.

For many new moms facing comparable health issues, C-sections are a necessity. But for Bowman, 37, it was the preferred choice for delivery.

"I wanted a C-section," said Bowman, a nurse at OhioHealth Riverside Methodist Hospital. "It's probably the surgical nurse in me. ... Surgery is my life. It seemed more controlled and planned out."

What she didn't want, however, were copious amounts of prescription opioids for the pain that comes with cutting through skin and muscle.

Enter the "On-Q Pain Relief System," informally called the "pain ball." The pain ball delivers a nonaddictive, numbing anesthetic through a catheter directly to surgical incisions. It's one of a number of opioid alternatives being used to help moms who have had C-sections deal with post-surgery discomfort.

Bowman was up and moving within 24 hours of giving birth. "It was amazing," she said.

When Dr. Anita Somani started her obstetrics/gynecology practice more than 25 years ago, expectant mothers weren't thinking as much about opioids and the addiction issues that dominate today's headlines. Now, they're more aware of the dangers, and they don't want to expose their babies to unnecessary narcotics when breastfeeding.

Those concerns can be taken too far, said Somani, who performs deliveries and other operations at Riverside.

"Most studies show that if you only take (opioids) for seven days and you don't get refills, you're less likely to then become addicted," Somani said. "It's the people who are getting multiple prescriptions, they tend to become more dependent."



Katrina Bowman recovered from the C-section delivery of her daughter, Kinley, with the help of a device that delivers an anesthetic to a surgical incision, cutting down on opioid use.

[KYLE ROBERTSON/DISPATCH]

Officials have implemented a number of changes in recent years to shift guidelines and better monitor narcotics prescriptions, ultimately reducing the number of painkillers provided to patients. Doctors have changed their approach to pain treatment, too.

"We prescribe less narcotics, and our patients are using less narcotics," Somani said. "That's the goal, to adequately treat pain without creating a situation where someone becomes dependent."

In simple terms, opioids attach to receptors in the body, providing relief. The pain is still there, "it just makes you not care about the pain," said Megan Little, a nurse and territory manager for Georgia-based Avanos Medical, the maker of On-Q. "It doesn't directly treat the pain sensors or block pain signals."

If narcotics are used over time, it takes higher doses to achieve the same effect for some patients, she said.

But the pain ball uses an anesthetic, rather than an opioid, that is designed to be nonaddictive. A thin catheter delivers the medicine into incision areas, with medication flowing directly into muscle and tissue through tiny holes. The device is carried in a small bag, and patients remove the catheter themselves after a few days.

The device has been in use for about 20 years for different types of surgeries. Somani is among the doctors who in recent years have adopted it for most of her C-section mothers.

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