

Acetaminophen Alone Works Well for Postpartum Pain

17 March 2010, By Joan Vos MacDonald

For many mothers of newborns, lingering pain from the delivery can interfere with their first days with their infant. A recent review examined whether over-the-counter medications containing acetaminophen - Tylenol for example - provided adequate relief for such pain and concluded that they are effective.

Bruising during the delivery or interventions such as the use of forceps or an episiotomy can cause perineal pain.

“The reason to conduct this review comes from the more contemporary understanding that adequate relief of perineal pain is an important issue for the mother - a quality of life issue - and may affect her ability to interact with her baby,” said Dr. Doris Chou, lead review author. “But of course in the excitement after a baby’s birth, a mother’s needs may be forgotten.”

Chou is a medical officer with department of [reproductive health](#) and research at the [World Health Organization](#) and is lead author of the review.

The review appears in the current issue of The Cochrane Library, a publication of The Cochrane Collaboration, an international organization that evaluates research in all aspects of health care. Systematic reviews draw evidence-based conclusions about medical practice after considering both the content and quality of existing trials on a topic.

Altogether, the reviewers analyzed 10 studies comprising 1,367 women who received a single dose (500 mg) of [acetaminophen](#), a double dose (1,000 mg) or a [placebo](#). Women who received acetaminophen rather than a placebo were 95 percent more likely to report pain relief.

While acetaminophen is already a standard postpartum pain relief therapy, “it is important to

understand why and upon what evidence even the most seemingly basic interventions are offered,” Chou said.

Besides acetaminophen alone, clinicians often give ibuprofen alone or medications containing a combination of acetaminophen or ibuprofen with a narcotic — for example [Tylenol 3](#) or Percocet — for [pain relief](#).

“Certainly acetaminophen alone appears to have some effect and has the lowest side-effect profile of all the medications,” said Laura Goetzl, M.D. “Therefore, if a woman’s personal pain can be controlled adequately with acetaminophen, this is a safe and effective intervention.”

Goetzl, with the Division of Maternal Fetal Medicine at the Medical University of South Carolina, is not affiliated with the review.

The review did not have enough data to assess the safety of giving acetaminophen to breastfeeding mothers or any effect this might have on their babies.

Review studies took place between 1973 and 1992. In recent years, obstetricians have been exploring ways to ease delivery and reduce postpartum pain.

“There is less perineal pain now as routine episiotomies are discouraged and fewer forceps vacuum deliveries are being performed,” Goetzl said. “Therefore I would expect that perineal pain is less now than it was when the original articles were published.”

Future reviews will cover other medications for postpartum pain, for instance nonsteroidal anti-inflammatory drugs (NSAIDs) like Advil.

“No matter what trends occur in obstetrics regarding mode of delivery or methods of assisting delivery, spontaneous birth that is without any

medical interventions may still result in discomfort and pain for the mother,” Chou said.

More information: Chou D, et al.

Paracetamol/acetaminophen (single administration) for perineal pain in the early postpartum period. Cochrane Database of Systematic Reviews, 2010. Issue 3.

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