In the News

- The DEA now allows nurses to relay chart orders to pharmacies for to ease access opioids in nursing homes.
- The FDA has approved: Botox for chronic migraines & single-use, syringes of Relistor for opioid-constipation.
- The FDA has recalled some Transdermal Fentanyl products that releases drug too quickly, as well as recalling Tylenol 8 hour caplets that have an objectionable smell, after a series of 2010 recalls for J&J OTC products.
- NIH has issued a formal call for nominations to the Interagency Pain Research Coordinating Committee.

Journal Watch

All items are accessible via MGH computers/library. MGHers can obtain other articles from through the Treadwell home page: go to 'Order Articles' under the 'Quick Picks' banner on the left.

- Upshur CC, Bacigalupe G, Luckmann R. (2010) “They Don't Want Anything to Do with You”: Patient Views of Primary Care Management of Chronic Pain. *Pain Med, October 1.* Patients feel disrespected and distrusted, suspected of drug-seeking, and having their symptoms dismissed as not worthy of treatment. They responded better when feeling listened to, trusted, have an accessible provider who provides patient-focused primary care.
- Ho KY, Tay W, Yeo MC, et al. (2010). Duloxetine reduces morphine requirements after knee replacement surgery. *Br J Anaesth, 105*:371-6. In a small study, Duloxetine 60 mg 2hours pre-op & a second dose the next day; had the same pain, but used 1/3 less morphine than those getting placebo; without more or less side effects
- Reese JB, Somers TJ, Keefe FJ, et al. (2010). Pain and functioning of rheumatoid arthritis patients based on marital status: Is a distressed marriage preferable to no marriage? *J. of Pain, 11 (10):958-964.* Marriage helps but pain, physical & mental functioning is linked to marital adjustment; so non-distressed marriages are better.
- Schreier A. (2010). Nursing care, delirium and pain management for the hospitalized older adult. *Pain Manag Nurse, 11 (3):177-185.* Excellent review that helps the clinician hone assessment and treatment for this complex patient type. Pain is one factor that increases the risk for delirium in older adults. Once established, delirium the selection of an appropriate analgesic and using nondrug techniques can reduce pain and delirium.
Journal Watch (continued)

- Raichle KA, Romano JM, Jensen MP. (2010) Partner responses to patient pain and well behaviors and their relationship to patient pain behavior, functioning, and depression. *Pain.* [ePub ahead of print] Being overly negative or over-protective of patients demonstrating pain behaviors will generally result in poorer functioning.
- The first of a 10-part Pain Management eNewsletter for Primary Care Providers is now available online.

CAM (Complementary and Alternative Medicine)

- The effect of glucosamine/chondroitin are minimal for arthritis of the hip or knee. Was prior research biased?
- While TENS improves circulation for healthy controls, it does not have the same benefit for coronary patients
- Appropriately applied clinical massage therapy creates many physiological benefits in addition to comfort.

Pain Resources on the Web

- Terrific new website dedicated to helping professionals and patients understand safe opioid use opioids911.org
- In the Face of Pain; has new advocacy, education & empowerment resources for patient & professionals.
- Are you ready for REMS? Learn more and get access to helpful webinars, slides and other resources.

Pain-Related Education Opportunities

- Wed Nov 10 Advancing our Understanding of Safe Use of Acetaminophen conference in Bethesda, MD (free)
- Tue-Wed Nov 16-17 The FDA is holding a conference on Safe Medications Use in Washington, DC
- Tue Nov 30th Pain Management in the Interdisciplinary Practice of Palliative Care Beth Israel, NY, NY
- Fri-Sun Dec 3-5 A Neuropathy Summit will bring together providers & patients will be in Washington DC

MGH Pain Calendar

- **Chronic Pain Rounds** occur weekly on Mondays at 12:00N Mail: DKallis@partners.org for details
- **Palliative Care Grand Rounds** occur weekly on Wednesdays at 8:00am. Mail: nalawless@partners.org

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<th>MGH Pain Resources:</th>
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<td>PainRelief web site: <a href="http://www.massgeneral.org/painrelief/">http://www.massgeneral.org/painrelief/</a></td>
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<td>The MGH Center for Translational Pain Research: <a href="http://www.massgeneral.org/painrelief/">MGH Center for Translational Pain Research</a></td>
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<tr>
<td>MGH Pain Medicine: <a href="http://www.massgeneral.org/painrelief/">Massachusetts General Hospital Department of Anesthesia, Critical Care and Pain Medicine - Clinical Services &gt; MGH Pain Management</a></td>
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<td>Partners Handbook: <a href="http://is.partners.org/handbook/">http://is.partners.org/handbook/</a></td>
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<td>Primary Care Office InSite (PCOI) (Clinician and patient information): <a href="http://oi.mgh.harvard.edu/pcoi/frontpage_frames.asp">http://oi.mgh.harvard.edu/pcoi/frontpage_frames.asp</a></td>
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<td>Intranet site for MGH use to locate pain assessment tools and policies. <a href="http://intranet.massgeneral.org/pcs/Pain/index.asp">http://intranet.massgeneral.org/pcs/Pain/index.asp</a></td>
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MGH Cares About Pain Relief

Massachusetts General Hospital

PainRelief@Partners.org • [http://www.MassGeneral.org/PainRelief](http://www.MassGeneral.org/PainRelief)

To be added to or removed from the Pain Relief Connection mailing list, send an email to pmarnstein@partners.org