PAIN RELIEF CONNECTION
THE PAIN INFORMATION NEWSLETTER
Provided by MGH Cares About Pain Relief, a program of MGH Patient Care Services

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In the News
● Amid 2011 & 2012, the CDC noted a 5% drop in Rx painkiller deaths, first decline ever; but heroin deaths increased 35% during the same yr.
● The Dept of Health & Human Services is seeking nominations for committee members (3 year appointments) to shape the future of pain care.
● All in-state prescribers enrolled in the MA Px drug monitoring program can now authorize “delegate” access the database on their behalf.
● Massachusetts revised and validated the central role of nurses and their duty to manage pain in a safe, effective, team-based way.
● Now that money received from drug manufacturers is public, is that affecting public trust in using doctors with financial ties to manufacturers?
● Claims data show a cut in the number of people taking opioids, but still concerning trends of high doses and drug interactions.

Journal Watch [MGHers can obtain articles through the Treadwell home page]
● Boonstra AM, Schiphorst Preuper HR, et al. Cut-off points for mild, moderate, and severe pain on the visual analogue scale for pain in patients with chronic musculoskeletal pain. Pain. 2014 Dec;155(12):2545-50. Given variability in how mild, moderate & severe pain determined & validated; it appears doubtful that consistent cut-points linking a number to a pain severity can be found.
● Hwang U, Belland LK, Handel DA, et al. Is all pain is treated equally? A multicenter evaluation of acute pain care by age. Pain. 2014 Dec;155(12):2568-74. Age-specific differences in the way pain is treated may vary based on the type of pain; with fractures better treated than abdominal pain in older adults. Patients over age 85 were less likely to receive analgesics than their younger counterparts.
Journal Watch  [MGHers can obtain articles through the Treadwell home page] (continued)

- Hunsinger M, Smith SM, Rothstein D, et al. Adverse event reporting in non-pharmacologic, non-interventional pain clinical trials: ACTTION systematic review. *Pain*, 2014 Nov;155(11):2253-62. Despite assumptions that nondrug interventions are safe, clinical trials of these methods aren’t required to, and don’t, report adverse event demonstrating they are safer than drugs or interventional therapies.


- Poonai N, Bhullar G, Lin K, et al. Oral administration of morphine versus ibuprofen to manage post fracture pain in children: a randomized trial. *CM AJ*, 2014 Dec 9;186(18):1358-63. Morphine (0.5 mg/kg orally) provided comparable pain relief at 1 hour to ibuprofen (10 mg/kg) in children with uncomplicated fracture of an extremity. Ibuprofen was better tolerated and thus may be the better choice.


- Williams CM, Maher CG, Latimer J, et al. Efficacy of Acetaminophen is no better than placebo for low back pain whether scheduled or PRN.

**Pain Resources on the Web:**

- A MayDay Society Fellow Elliot Krane explains how acute pain can transition to the disease of chronic pain in this TED-ED segment.

- See the similarities and differences in opioid prescribing recommendations from various American evidence-based guidelines.

- Resource guides for consumers are available from the ACPA addressing chronic pain in general, and low back pain in particular.

- Learn more about Abuse Deterrent Opioid formulations that are increasingly tamper resistant to prevent diversion and misuse.

- The power of skin to skin contact between a baby and parent to reduce newborn needle pain is demonstrated in this brief video.

**CAM (Complementary and Alternative Medicine)**

- FDA approved a wireless injectable, micro-neurostimulator to treat intractable chronic pain with safer, less invasive implant technology.

- A recent research review showed Reiki lowers pain and anxiety with little or good effects; better when used in combination with medications.

- A new smart heating pad controlled by a smartphone app could revolutionize the safety and efficacy of this form of nondrug pain relief therapy.

**Pain-Related Education Opportunities**

- Wed Jan 14th Free Live Webinar on Opioids, Chronic Pain, and REMS role of long-acting opioid s in managing chronic pain at 1-2pm.

**MGH Pain Calendar**

- *Pain and Its Management at MGH* (Level I) – Friday, January 9th. Founders House 325 8:00 – 9:00 AM No registration required.  email for info

- *Tools and Techniques for Effective Pain Management* (Level II) – Wednesday, Jan 14th 2015 Founders House 325 1:00 – 5:00 PM  Sign-up.

- *Palliative Care Grand Rounds* at MGH are held Wednesday mornings from 8:00 – 9:00 AM in the Ether Dome.

**MGH Pain Resources**

The Patient Education Television: Dial 4-5212 from patient’s phone then order: (see handbook f http://handbook.partners.org/pages/168 for listing: #120 Acute Pain #279 for Chronic Pain; #280 for Cancer Pain; #281 for Communicating Pain; #282 for Pain Medications;


The MGH Center for Translational Pain Research: http://www.massgeneral.org/painresearch


MGH Palliative Care: http://www.massgeneral.org/palliativecare

MGH Formulary (includes patient teaching handouts in 16 languages): http://www.crlonline.com/crlsql/servlet/crlonline

Intranet site for MGH use to locate pain assessment tools and policies: http://intranet.massgeneral.org/pcs/Pain/index.asp

MGH Cares About Pain Relief

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