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MGH CARES ABOUT PAIN RELIEF

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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

- Will making hydrocodone harder to get lead to more pain not less addiction? Or will illicit use decline if it's in fewer medicine cabinets?
- FDA discussed the merit of a proposal to limit opioid use for non-cancer pain making <u>schedule II opioids only for severe non-cancer pain</u>.
- The FDA outlines all it is doing to reduce prescription opioid related morbidity/mortality through developing and expanding workgroups.
- The FDA now lists <u>codeine as contraindicated in children</u> after tonsillectomy/adenoidectomy surgery. Choose safer, more effective drugs.
- A newly-approved drug, ospemifene, provides less pain during sexual intercourse that is experienced by some postmenopausal women.

Journal Watch

All items are accessible via MGH computers/library. MGHers can obtain other articles from through the Treadwell home page

- Olsen AM, Fosbøl EL, Lindhardsen J, et al. (2012). Long-term cardiovascular risk of nonsteroidal anti-inflammatory drug use according
 to time passed after first-time myocardial infarction: a nationwide cohort study. Circulation, 126 (16):1955-63. An increased risk of death
 for up to 5 years after a myocardial infarction is seen with a history of prolonged NSAID use. Naproxen may be the safest in the class.
- Hausmann LR, Gao S, Lee ES, et al. (2013). Racial disparities in the monitoring of patients on chronic opioid therapy. *Pain, 154*(1):46-52. Black patients prescribed opioids for non-cancer pain were referred to pain specialists less, but for substance abuse assessment more.
- Jacobs WC, van der Gaag NA, Kruyt MC, et al. (2013). <u>Total disc replacement</u> for chronic discogenic low back pain: a Cochrane review *Spine*, *38*(1):24-36. Although short-term benefits are as good as a fusion; long term benefits of this emerging technology are unknown.
- Barr J, Fraser GL, Puntillo K, et al. (2013). Clinical practice guidelines for the management of pain, agitation, and delirium in adult patients in the intensive care unit. Crit Care Med., 41(1):263-306. Best assessment scales & treatments for ICU pain, agitation & delirium.
- Taylor SS, Davis MC, Zautra AJ. (2013). Relationship status and quality moderate daily pain-related changes in physical disability, affect, and cognitions in women with chronic pain. *Pain.* 154(1):147-53 Being in a quality committed relationship enhances coping & functioning.
- Stevens B, Yamada J, Lee GY, et al. (2013). <u>Sucrose for analgesia in newborn</u> infants undergoing painful procedures. *Cochrane Database Syst Rev.* 2013 Jan 31;1:CD001069. Sucrose safely reduces procedural pain in infants, but there is no standard dose/interval.
- Häuser W, Urrútia G, Tort S, et al. (2013). Serotonin and noradrenaline reuptake inhibitors (<u>SNRIs</u>) for fibromyalgia syndrome. Cochrane Database Syst Rev. 2013 Jan 31 CD010292. FDA-approved antidepressants for fibromyalgia provide some help for pain but not sleep or other indicators of efficacy. The side effect burden causes 10-20% to stop taking them, although serious adverse effects are uncommon.

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Journal Watch (continued) [MGHers can obtain articles through the <u>Treadwell home page</u>]

- Bunzli S, Watkins R, Smith A, et al. Lives on hold: a qualitative synthesis exploring the <u>experience of chronic low-back pain</u>. *Clin J Pain*. [ePub ahead of print]. Often misunderstood by clinicians, people with low back pain feel their "wellness", "self", and "future" are on hold.
- Hirschfeld G, Zernikow B. (2013). Variability of "optimal" cut points for mild, moderate, and severe pain: neglected problems when comparing groups. *Pain*, *154*(1):154-9. Despite support for using <u>numeric cut-points</u> for rating mild (0-3), moderate (4-7) & severe (8-10) pain across populations, there remains random fluctuations with 60% of the variability unexplained, requiring other factors be considered.
- Lunn TH, Andersen LØ, Kristensen BB, et al. (2013). Effect of high-dose preoperative methylprednisolone on recovery after total hip arthroplasty: a randomized, double-blind, placebo-controlled trial. *Br J Anaesth*, 110(1):66-73. Pre-op steroids cut pain on day 1, not LOS.
- Willens J Junquist CR, Cohen A, et al. (2013) ASPMN Survey—Nurses' Practice Patterns Related to Monitoring and Preventing Respiratory Depression. *Pain Manag Nurs*, *14* (1): 60-65. Practices to <u>identify & prevent respiratory depression</u> are highly inconsistent, but almost all of the 90 hospitals surveyed are using double checks and oximetry for at least those at risk (age, obesity sleep apnea).

Pain Resources on the Web

- What should you do if a <u>patient appears somnolent or intoxicated</u> when taking opioids? It may be an overdose or something else.
- A nice description of different professional disciplines' role in promoting safe use and avoiding misuse or diversion of prescription opioids.
- What role does spirituality play in pain management, and how can healthcare providers begin this discussion with their patients?
- Marmalade and some fruit juices, especially <u>grapefruit juice</u>, <u>can affect how analgesics work</u>. A simple <u>patient-friendly video</u> is available.
- <u>Fibromyalgia</u>, patient booklets in English and Spanish produced by the National Institute of Arthritis & Musculoskeletal & Skin Diseases.

CAM (Complementary and Alternative Medicine)

- A systematic review shows that <u>yoga can be an effective part of managing pain</u> in patients with chronic low back pain.
- The mechanisms of listening to "preferred" or "healing" music; as well as "pain music" each activate different brain centers related to pain.
- An <u>interactive educational tool about CAM</u>, reviews body-based, mind-body, energy-based, and other pain relief methods.

Pain-Related Education Opportunities

- Thu March 14th A Nation in Pain: Healing Our Biggest Health Problem 4-5:30 Judy Foreman and panel. Free @ Tufts in Boston, MA
- Sat March 23rd Best Practices for Acute Pain Management of the Patient with Chronic Pain featuring Chris Pasero. 8-4:30 Waltham, MA
- Thu-Fri April 4-5th A new End-of-Life Nursing Education Consortium (ELNEC) course for Advanced Practice Nurses will be offered
- Tue-Thu April 2-4th National Prescription Drug Abuse Summit is hosting a multi-track forum to address Rx abuse. Orlando, FL
- Wed-Sat May 8-11th The American Pain Society 32nd Annual Scientific Meeting for pain clinicians, researchers & educators. New Orleans

MGH Pain Calendar

- Fri March 8th and 29th Need-to-know Basics of Pain Management: Mass General Founders 325 at 8-9am email for info or just drop in
- Wed April 9th 7am 11am, Tools and Techniques for Effective Pain Management Founders 325 email for info
- Chronic Pain Rounds occur weekly on Mondays at 12:00N Mail: email Tina Toland for details
- Palliative Care Grand Rounds occur weekly on Wednesdays at 8:00am. email: Margaret Spinale

MGH Pain Resources

The Patient Education Television: Dial 4-5212 from patient's phone then order: #279 for Chronic Pain; #280 for Cancer Pain; #281 for Communicating Pain; #282 for Prescription and Non-prescription Pain Medications; @3283 for Postoperative Pain Excellence Every Day Pain Portal Page: http://www.mghpcs.org/eed_portal/EED_pain.asp

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

MGH Pain Medicine: http://www2.massgeneral.org/anesthesia/index.aspx?page=clinical_services_pain&subpage=pain 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

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