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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

- Novartis received FDA approval for <u>llaris</u>, a new subcutaneous drug given once monthly for active systemic juvenile idiopathic arthritis.
- FDA to hold a scientific workshop and open public hearing in July to discuss issues surrounding equianalgesic opioid conversion tables.
- The use of <u>valproate products in pregnant women</u> for migraine prevention may cause lowered IQ in children, according to FDA warning.
- The University of Wisconsin Pain & Policy Studies Group released a report, "<u>Achieving Balance in State Pain Policy</u>: A Progress Report Card", evaluating and grading the degree to which each state has adopted laws that remove barriers to safe and effective pain relief.
- The AAOS updated evidence-based clinical guidelines for knee osteoarthritis. Earlier recommendations for hyaluronic acid injections were removed. The guideline scope includes pharmacologic, nondrug and procedural interventions less invasive than knee arthroplasty.

Journal Watch

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

- Faigeles B, Howie-Esquivel J, Miaskowski C, et al. (2013). Predictors and use of nonpharmacologic interventions for <u>procedural pain</u> associated with turning among hospitalized patients. *Pain Mgt Nursing*. 14(2):85-93. Use of a calming voice and deep breathing were the two most common non-pharmacological techniques used when turning patients. Gender and ethnicity were predictors of their use.
- CNT (Coxib and traditional NSAID Trialists') Collaboration. (2013). Vascular and upper gastrointestinal effects of non-steroidal anti-inflammatory drugs: meta-analyses of individual participant data from randomised trials. *The Lancet*. Epub ahead of print. A comprehensive meta-analysis of <u>daily high-dose NSAID</u> use confirmed and characterized cardiovascular and GI risks between different drugs; diclofenac had a cardiovascular risk similar to coxibs, and all NSAIDs were found to double the risk of heart failure and GI bleed.
- Coggon D, Ntani G, Palmer KT, et al. (2013). Disabling musculoskeletal <u>pain in working populations</u>: Is it the job, the person, or the culture? *Pain.* 154(6):856-63. Nurses, office workers and laborers from 18 countries reported significantly different levels of disabling pain unrelated to socioeconomic factors, commonly believed risks & access to health services or worker compensation. A pattern noted was nurses' vulnerability (10-43%) to disabling back pain; with office workers more often (2-32%) reporting disabling hand & wrist pain.

MGH Cares About Pain Relief
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Journal Watch (continued) [MGHers can obtain articles through the Treadwell home page]

- Longo G, Osikowicz M, Ribeiro-da-Silva A. (2013). <u>Sympathetic fiber sprouting</u> in inflamed joints and adjacent skin contributes to pain-related behavior in arthritis. *J Neuroscience*. 33(24): 10066-10074. Abnormal sympathetic fibers in the epidermis were discovered in arthritis-induced rat models; allodynia and hyperalgesia were reversed with sympathetic block, suggesting potential treatment avenues.
- Rasu RS, Sohraby R, Cunningham L, et al. (2013). Assessing chronic pain treatment practices and evaluating adherence to chronic pain clinical guidelines in outpatient practices in the United States. *Journal of Pain. 14*(6), 568-578. Studying a dataset of 8.9 billion outpatient visits in the U.S. (2000-2007), 690 Million (13%) of all visits were for chronic pain. Data support racial disparities in access to care; and care is provided mostly by PCPs (only 2% visits to pain specialists). NSAIDs were prescribed in 95% of cases, even for diagnoses and patient groups that guidelines warn about ineffectiveness or safety concerns. Opioids, adjuvants & nondrug therapies are underused.
- McHugh, R.K., DeVito, E.E., Dodd, D., et al. (2013). <u>Gender differences</u> in a clinical trial for prescription opioid dependence. *Journal of Substance Abuse Treatment*. 45(1), 38-43. Before treatment men were more likely to initiate prescription opioid use from non-medical sources and misuse the drug. Women had poorer (physical, mental, emotional) functioning; both were equally responsive to treatment.

Pain Resources on the Web

- American Chronic Pain Association's Ability Chart is a tool for patients to identify specifically how arthritis impacts their daily functioning.
- GlobalRPh's <u>Advanced Opioid Converter</u> is an online calculator to guide clinicians in determining equivalent doses of opioid analgesics.
- The NIH Pain Consortium has posted videos of its annual meeting on "Integrated Self-Management Strategies for Pain" (<u>Day 1</u>, <u>Day 2</u>).

CAM (Complementary and Alternative Medicine)

- The latest issue of the American Chronic Pain Association's quarterly newsletter, <u>Chronicle</u>, focuses on CAM therapies.
- Because <u>neck pain</u> is so common, patients often turn to CAM. This article compares three types of manipulative therapies for neck pain.
- A guided online cognitive-behavioral therapy program, <u>Pain Course</u>, was found to improve anxiety, disability, depression and pain scores.

Pain-Related Education Opportunities

- Tue July 9, 10am 12p. <u>Challenges in the Assessment and Management of Chronic Pain</u>, a free, online CME opportunity.
- Wed-Sat Sept 4 7. PAINWeek National Conference on Pain for Frontline Practitioners. Las Vegas, NV.
- Sat-Mon Sept 7 9. Acute Pain Management Symposium, a 3-day course on best practices to treat acute pain. Boston, MA.
- Wed-Sat Oct 9 12. American Society for Pain Management Nursing (ASPMN) 22nd National Conference. Indianapolis, IN.
- American Pharmacists Association is sponsoring a <u>free online pharmacy CE course</u>, Encouraging Safe Use of Acetaminophen.

MGH Pain Calendar

- Tools and Techniques for Effective Pain Management Mon, Aug 12. Repeated Fri, Oct 25 Founders House 325 email for info
- Chronic Pain Rounds expected to resume in August. Email <u>Tina Toland</u> for details

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/palliativecar

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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