

PATIENT CARE SERVICES

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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

- <u>A petition prevents politicians</u> from overturning the FDA's determination of the safety & efficacy of drugs based on their data & methods.
- Zogenex sues Massachusetts for blocking access to the analgesic & undermining the FDA's authority. A judge halt's the governor's ban.
- A call to better understand and manage the intersection of concern between chronic pain and addiction rather than focus on 1 villain.
- Study shows that recent or current NSAID users have 80% higher risk of atrial fibrillation than non-use, adding to known cardiac risks.
- April 16th the FDA updated REMS Labeling & denied a petition for limiting the use of ERLA opioids requested on behalf of pregnant women
- FDA approved a user-friendly Naloxone injection that provides verbal injection instructions for the emergency treatment of opioid overdose
- <u>Nurses cut pain</u> through use nondrug therapies including care, empathy and cognitive-behavioral methods designed for those with pain.

Journal Watch [MGHers can obtain articles through the Treadwell home page]

- Cohen SP, Hameed H, Kurihara C, et al. The effect of sedation on the accuracy and treatment outcomes for diagnostic injections: A randomized, controlled, crossover study. *Pain Med.* 2014 Apr;15(4):588-602. <u>Blocks performed with sedation</u> cut pain initially, but don't improve patient satisfaction, a may lead to misdiagnoses & unnecessary procedures. Any short term gains are lost within one month.
- Daoust R, Paquet J, Lavigne G, et al. Senior patients with moderate to severe pain wait longer for analgesic medication in EDs. Am J Emerg Med. 2014. Apr;32(4):315-9. Older adults wait an hour longer (median 3.2 hours) for pain medications than young adults in the ED.
- De Oliveira GS Jr., Castro-Alves LJ, Nader A, et al. <u>Transversus abdominis plane block to ameliorate postoperative pain</u> outcomes after laparoscopic surgery: a meta-analysis of randomized controlled trials. *Anesth Analg*. 2014;118:454-63. Start TAP block before surgery.
- Harlos MS, Stenekes S. Lambert D, et al. Intranasal Fentanyl in the palliative care of newborns and infants. J Pain Symptom Manage. 2013;46:265-74. Intranasal Fentanyl can <u>comfort dying babies</u> in different settings without major side effects or chest wall rigidity.
- Paulsen O, Aass N, Kaasa S, et al. Do <u>corticosteroids provide analgesic effects</u> in cancer patients? A systematic literature review. *J Pain Symptom Manage*. 2013;46:96-105. Low guality evidence supports tolerable analgesic effects with a short course of corticosteroids.
- Felden L, Walter C, Harder S, et al. Comparative clinical effects of <u>hydromorphone and morphine</u>: a meta-analysis. *Br J Anaesth. 2011* Sep;107(3):319-28. Among non-surgical patients admitted to 288 US hospitals over a 1 year period, 39% got morphine & 25% Dilaudid. When relative potencies are considered the effects & side effects are comparable, but Dilaudid patients receive 3-times stronger doses.
- Hamill JK, Lyndon M, Liley A, et al. Where it hurts: a systematic review of pain location tools for children. Pain. May;155(5):851-858.

MGH Cares About Pain Relief Massachusetts General Hospital

PainRelief@partners.org
http://www.mghpcs.org/painrelief
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Journal Watch [continued]

- Choinière M, Watt-Watson J, Victor JC, et al. .Prevalence of and risk factors for persistent postoperative non-anginal pain after cardiac surgery: a 2-year prospective multicentre study. CMAJ. 2014 Apr 15;186(7):E213-23. A substantial number of patients develop chronic pain after cardiac surgery. Acute post-operative pain predicted the rate & severity of chronic pain following after cardiac surgery.
- Singla NK, Desjardins PJ, Chang PD. A comparison of the clinical and experimental characteristics of four acute surgical pain models: Dental extraction, bunionectomy, joint replacement, and soft tissue surgery. *Pain. 2014* Mar;155(3):441-456. <u>Acute pain treatments</u> are derived from research done on one of 4 model that are fraught with methodological limits given patient, professional & setting variability.
- Chou R, Cruciani RA, Fiellin DA, et al. <u>Methadone safety: a clinical practice guideline</u> from the American Pain Society and College on Problems of Drug Dependence, in collaboration with the Heart Rhythm Society. *J Pain. 2014* Apr;15(4):321-37. Safe use of methadone requires clinical skills and knowledge in using methadone to mitigate potential risks, including serious cardiac risks & fatal overdoses.

CAM (Complementary and Alternative Medicine)

- <u>Virtual reality helps amputees</u> reduce phantom limb pain, other phantom sensations & improve residual limb / prosthesis functioning.
- Pulsed Electromagnetic Therapy is safe & easy to use for many pains, including: muscle strain, plantar fasciitis, osteoarthritis & neck pain.
- <u>Spinal Manipulation Therapy</u> temporarily lowers pain sensitivity by cutting central sensitization, which could account for its effect.
- An evidence-based guideline supports the use of <u>cannabis to relieve pain & spasticity</u> for multiple sclerosis when ingested but not smoked.

Pain Resources on the Web:

- A basic patient education guide to managing opioid-related side effects of constipation, fuzzy thinking, impotence & other troubling effects.
- The American Chronic Pain Association's extraordinary Guide To Chronic Pain Medication & Treatment; a valuable resource for all desks
- The American Society for Pain Management Nursing recently posted a Position Statement on Pain Management at the End of Life.

Pain-Related Education Opportunities

- Wed April 30th Looking at Pain Through Different Perspectives Jeffery Fudin, PharmD; & author Judy Foreman Marlboro, MA 7:30 noon
- Sun-Tue June 8-10 2014 International Conference on Opioids explores the best ways to use opioids for healing without harm. Boston
- Thu –Fri Jun 12-13 the Art & Science of Palliative Nursing offered through Harvard University 8:00-4:30 Brookline MA
- Mon-Fri June 23-27 <u>Harvard Medical School Principles & Practice of Pain Medicine</u> Cambridge, MA

MGH Pain Calendar

- Pain and Its Management at MGH (Level I) Fri May. 2nd. Founders 325 8am 9am. No registration required. email for info
- Tools and Techniques for Effective Pain Management (Level II) Wed, June20th Haber Auditorium 8am 12:30pm email for info.
- Gain Control of Complex Pain (Level III) Fri. June 27th 8am 4:00pm Haber auditorium email for info.
- Palliative Care Grand Rounds occur weekly on Wednesdays at 8:00am. email: Margaret Spinale
- Chronic Pain Rounds in MGH Ether Dome. Email <u>Tina Toland</u> for details.

GH 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; 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

MGH Cares About Pain Relief Massachusetts General <u>Hospital</u>

PainRelief@partners.org 🥏

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