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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

- New long-acting buprenorphine Belbuca buccal film is being developed to manage chronic pain with an October 2015 FDA decision likely.
- FDA approved <u>Dyloject, an IV diclofenac</u> (37.5mg) used alone for mild-moderate pain and in combination with opioids for more severe pain.
- Could <u>Ketamine become the next up-scheduled controlled substance</u>, moving from Schedule III to Schedule II because of its "party drug" use?
- <u>A Massachusetts Opioid Task Force Listening Session</u> Thurs, April 2nd State House @ 3pm (Gardner) Boston to address opioid use & abuse.
- Curing opioid misuse requires avoids labeling and blaming others and finding real solutions for effective pain control.
- The DHHS proposes a new initiative to cut prescription opioid and heroin-related overdose deaths; that include professional decision support.

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

- Mbizvo GK, Nolan SJ, Nurmikko TJ, et al. <u>Placebo responses in long-standing Complex Regional Pain Syndrome</u>: A Systematic Review and Meta-Analysis. *J Pain*. 2015 Feb;16(2):99-115. No evidence for placebo analgesia lasting more than 30 minutes in nearly 50 years of research on CRPS. Placebo treatments for CRPS pain shouldn't be done in research or practice.
- Brown SE, Weisberg D, Balf-Soran G, et al. Sickle cell disease patients with and without extremely high hospital use: Pain, opioids, and coping. J Pain Symptom Manage. 2015 Mar;49(3):539-47. Low use patients are allies using specific interpersonal & symptom-related strategies, whereas high hospital-utilizing patients take a defensive, reactive stance toward their providers, who were similarly defensive.
- Taddio A, Rogers JM. Why are children still crying? Going beyond "evidence" in guideline development to improve pain care for children: the HELPinKIDS experience. *Pain.* 2015;156 Suppl 1:S127-S135. Program examines why guidelines to <u>prevent & treat pediatric pain</u> are not used in clinical practice. High level, knowledge transfer of key messages to target audiences, tools & communication strategies are examined.
- Attal N, Bouhassira D. Pharmacotherapy of neuropathic pain: which drugs, which treatment algorithms? *Pain.* 2015;156 Suppl 1:S104-S114. Evidence-based guidelines to <u>treat neuropathic pain</u> but meta-analysis show limited use and lack of effectiveness of recommended therapies.
- Jensen MP, Trudeau JJ, Radnovich R, et al. The <u>Pain Quality Response Profile</u> of a Corticosteroid Injections and Heated Lidocaine/ Tetracaine Patch in the Treatment of Shoulder Impingement Syndrome. *Clin J Pain.* 2015 Apr;31(4):342-8. Both interventions provided similar pain reduction, but pain quality and effect over time differed. Treatment may be selected based on <u>what pain quality is most bothersome</u>.
- Hassan S, Muere A, Einstein G. Ovarian Hormones and Chronic Pain: A Comprehensive Review. Pain. 2014 Dec;155(12):2448-60. Can female sex hormones cut pain while treating certain chronic pain syndromes? Only menstrual migraine & endometriosis have clear evidence.

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

- Boccio E, Wie B, Pasternak S, et al. The relationship between patient age and pain management of acute long-bone fracture in the ED. *Am J Emerg Med.* 2014 Dec;32(12):1516-9. Most patients presenting to the ED with bone fracture were geriatric, these patients were the least likely to have their pain addressed in a timely fashion. Those younger than 3 & over 85 years old endured longest delays in treating pain.
- Valeri BO, Holsti L, Linhares MB. <u>Neonatal pain and developmental outcomes</u> in children born preterm: a systematic review. *Clin J Pain.* 2015 Apr;31(4):355-62. Neonatal painful procedures affects cognitive/motor development by age 1 & cortical structure/function by age 7.
- Cagle JG, Zimmerman S, Cohen LW, et al. EMPOWER: An <u>Intervention to Address Barriers to Pain Management in Hospice</u>. J Pain Symptom Manage. 2015 Jan;49(1):1-12. An educational and advocacy program resulted in better patient and family outcomes in hospice.
- van Dijk JF, van Wijck AJ, Kappen TH, et al. The effect of a preoperative educational film on patients' postoperative pain in relation to their request for opioids. *Pain Manag Nurs*. 2015. April. 16(2): 137-145. After surgery, patients are often medicated based on a pain score. A pre-op education film produced lower pain scores, lower barriers, and more knowledge of pain treatment than patients in the control group.

Pain Resources on the Web:

- APS refined website provides a unique multidisciplinary online experience for professionals in the field of pain research, education & practice.
- See the results of a large survey done on OTC pain relievers in response to FDA change in rules related to acetaminophen dose limits.
- Let's use clear consistent language when referring to a person with a Substance Use Disorder to prevent harm associated with stigmas.
- Patient education tool on safe use, safe storage and safe disposal of Extended Release / Long Acting opioids & avoiding alcohol interactions.

CAM (Complementary and Alternative Medicine)

- Meditation or yoga, can reduce pain perception and oppose the harmful effect chronic pain has on the brain.
- Optimizing the balance between exercise and recovery buffers detrimental stress, while promoting the attainment of optimal functioning.
- Virtual Reality technologies have helped with procedural pain, but someday may help change pain perception & functioning with chronic pain.
- Controversial study that acupuncture provides fleeting, modest knee pain control at best. suggest it may be less helpful for certain conditions.

Pain-Related Education Opportunities

- Tue Wed, May 26 27th, NIH Pain Consortium highlights key research latest discoveries & advances. Bethesda, MD
- Tue Wed, Jun 9 10th, Interprofessional SBIRT Conference Learn to help those with substance use disorder. Pittsburgh, PA
- Mon Fri, June 1 5th, Harvard Medical School's Principles and Practice of Pain Medicine expert faculty; Cambridge MA
- Sat Sat, Jul 18 25th, Brain Reorganization with Chronic Pain and Predictors of Chronification. Conference in the Italian Alps.
- Thurs Sat, Jul 23 25th, "Treating chronic pain in Primary Care" collaboration Family Practice & Pain Specialists. Orlando, FL

MGH Pain Calendar

- Pain and Its Management at MGH (Level I) Fri, Apr 3rd. Founders House 325 8am 9am. No registration required. email for info
- Fri, Apr 17th Why Can't They Just Stop? Understanding Substance Abuse Treatment Strategies 7:30-4 O'Keefe Auditorium Sign-up.
- Tools and Techniques for Effective Pain Management (Level I) Tues, Jun 2nd 2015 Founders House 325 @ 1 5pm Sign-up.
- Palliative Care Grand Rounds are Wednesday mornings from 8:00 AM 9:00 AM in the Ether Dome. eMail for schedule, details CE Credits
- Chronic Pain Rounds in MGH Ether Dome Mondays at Noon. Email <u>Tina Toland</u> for details

MGH Pain Resources

The Patient Education Television: Dial 4-5212 from patient's phone then order: (see handbook f http://handbook.patners.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://www.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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To be added to or removed from the Pain Relief Connection mailing list, send an email to pmanstein@pariners.org