

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

- FDA approves an implant that provides 6 months of the analgesic buprenorphine [for opioid maintenance therapy](#) to reduce overdose deaths.
- Limiting [older adults' access to opioids](#) is burdensome, requiring a combination of costly & difficult to access therapies in order to function.
- White House slows down CARA legislation to ensure adequate [funding needed to better treat opioid use disorder](#) treatment access.
- The American Academy of Pain Management voted to change the organization's name to the [Academy of Integrative Pain Management](#).
- Emergency rooms [embrace non-opioid therapies](#) like nerve blocks, laughing gas, even "energy healing" & a wandering harpist for acute pain.
- AMA Delegates [oppose barriers to accessing non-opioid pain therapies](#) including non-drug methods with limited evidence and high costs.
- Gov. Brown makes California the largest state to allow [physician assisted death to prevent "dying with prolonged excruciating pain"](#).
- [Counterfeit drugs](#) that look like 30 milligram oxycodone pills, but are in fact wholly made of fentanyl are being sold on the streets of Boston.
- [Governors of New England meet to talk about the opioid crisis](#), including legitimate & illicit use; root causes as well as potential legal solutions.
- An effort to create awareness of chronic pain and unify advocacy efforts is hitting social media with the [#ISpeakforPain campaign](#).

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

- Mauermann E, Filitz J, Dolder P, et al. Does fentanyl lead to opioid-induced hyperalgesia in healthy volunteers?: A double-blind, randomized, crossover trial. *Anesthesiology*. 2016;124:453-63. High-dose [Fentanyl produces a rebound hyperalgesia](#), changing pain sensitivity for hours.
- Pasero C, Quinlan-Colwell A, Rae D, et al. American Society for Pain Management Nursing Position Statement: Prescribing and [Administering Opioid Doses Based Solely on Pain Intensity](#). *Pain Manag Nurs*. 2016 Jun;17(3):170-80. Prescribing doses of opioid analgesics based solely on a patient's reported pain intensity should be prohibited as it disregards the relevance of other essential elements of assessment that may contribute to untoward patient outcomes. Risk of harm from treatment and co-morbidity needs to be considered.
- Simpson DM, Hallett M, Ashman EJ, et al. Practice guideline update summary: Botulinum neurotoxin for the treatment of blepharospasm, cervical dystonia, adult spasticity, and headache: Report of the Guideline Development Subcommittee of the American Academy of Neurology. *Neurology*. 2016 May 10;86(19):1818-26. [Botox for migraine](#) not for episodic or tension type headache; but helps chronic migraine
- Pathan SA, Mitra B, Straney LD, et al. Delivering safe and effective analgesia for management of renal colic in the emergency department: a double-blind, multigroup, randomised controlled trial. *Lancet*. 2016;387:1999-2007. For moderate and severe renal colic, [IM diclofenac cut pain in half](#) in 68% of patients compared to 66% of those receiving IV acetaminophen and 61% getting IV morphine (with more side effects).
- Grace PM, Strand KA, Galer EL, et al. [Morphine paradoxically prolongs neuropathic pain](#) in rats by amplifying spinal NLRP3 inflammasome activation. *Proc Natl Acad Sci U S A*. 2016 Jun 14;113(24):E3441-50. Brief morphine exposure 10 days after nerve injury in rats paradoxically doubled the duration of a painful response to non-painful stimuli (allodynia) for months after morphine exposure, in part via microglial activity.

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 pmarnstein@partners.org

Journal Watch [MGHers can obtain articles through the [Treadwell home page](#)] (continued)

- Savage SR, Romero-Sandoval A, Schatman M, et al. [Cannabis in Pain Treatment: Clinical and Research Considerations](#). *J Pain*. 2016 Jun;17(6):654-68. Cannabis is increasingly available for clinical use in the United States despite continuing controversies over its efficacy & safety. Tensions between state and federal laws and its reputation as a drug of abuse limit research / clinical evaluation of its risk/benefit ratio.
- da Costa BR, Reichenbach S, Keller N, et al. [Effectiveness of non-steroidal anti-inflammatory drugs](#) for the treatment of pain in knee and hip osteoarthritis: a network meta-analysis. *Lancet*. 2016 May 21;387(10033):2093-105. NSAIDs are more effective than acetaminophen for arthritis with Diclofenac 150mg/day deemed the most effective; but short study duration & lack of reporting known side effects limit the study.
- Reddy A, Yennurajalingam S, Reddy S, et al. The opioid rotation ratio from transdermal fentanyl to "strong" opioids in patients with cancer pain. *J Pain Symptom Manage*. 2016 Jun;51(6):1040-5. Cancer patients are frequently rotated to transdermal fentanyl in a sub-optimal way. The [relative potency of 100mcg/hr Fentanyl patch](#) is 240mg of oral morphine per day; and recommendations are to start at a lower patch size.
- Palermo TM, Law EF, Bromberg M, et al. Problem solving [skills training for parents of children w/ chronic pain](#): A pilot randomized controlled trial. *Pain*. 2016. Jun;157(6):1213-23. Parental problem-solving skills training is feasible & acceptable; yielding mixed psychosocial benefits.
- van den Beuken-van Everdingen MH, Hochstenbach LM, Joosten BE, et al. Update on [prevalence of pain in patients w/ cancer](#): Systematic review & meta-analysis. *J Pain Symptom Manage*. 2016 Jun;51(6):1070-1090.e9. Pain prevalence rates were 39.3% after curative treatment; 55.0% during cancer treatment & 66.4% in advanced metastatic or terminal disease. Moderate or severe pain is reported by 38% of patients.

Pain Resources on the Web:

- Nice review of different pathological mechanisms that cause [cancer pain](#), & effective pharmacologic as well as non-pharmacologic therapies.
- [Pain is invisible, and healing starts with believing](#). A family's story of finding help for their teen awhile overcoming the stigma and shame.
- Web-based continuing education on timely topics related to pain with interprofessional CE credits on the [learning library site](#).
- Pain Consortium Archived videocast of the NIH Spring meeting on research and translational models of pain [Day 1](#) and [Day 2](#)
- Nice review of etiologies & treatment options for, [painful spasticity and muscle spasm](#), including difference between the 2 to target therapy.
- A new on-line resource is available "[Making Cancer Less Painful for Kids](#)" launched in partnership with the Cancer Knowledge Network.

CIH (Complementary Integrative Health approaches; formerly called Complementary Alternative Medicine [CAM])

- [Virtual reality technology](#) with added sound enhances the ability to tolerate experimentally induced pain from cold-water immersion.
- [Aromatherapy provides relief](#) during peripheral intravenous starts, [but not for cancer](#) – related discomforts when combined with massage.
- [High-dose low level laser therapy](#) (including laser acupuncture) provides short term benefits for early chronic non-specific low back pain.
- Simple, evidence-based, [holistic comfort measures during pregnancy](#) that reduce pain intensity an average of 40% are reviewed.

Pain-Related Education Opportunities

- Wed – Sat, Sept 7-10 [National Pain Management Nursing Conference](#) (26th annual ASPMN conference) will be held in Louisville, Kentucky
- Sat Oct 8th Eastern Pain Society annual meeting in New York will cover a variety of [trends and innovations in pain management](#).

MGH Pain Calendar

- *Tools and Techniques for Effective Pain Management* – Tuesday, September 13th, 2016 *Founders House 325 @ 8AM – 1PM* [Sign-up](#).
- Palliative Care Grand Rounds are Wednesday mornings from 8AM – 9AM, Ether Dome. email: [Margaret Spinale](#) for more information
- *Chronic Pain Rounds* in MGH Ether Dome. Email [Tina Toland](#) for details.

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; 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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