September 2017
Illicit fentanyl overdoses rose 5
Several Mansell G, Hill JC, Main CJ, et al. Patient connects On
National Take Back Day
Maine cut prescribed opioids
Previous Newsletters
Golightly LK, Fitzgerald M. New model of
International McCaskill blames
New Surgeon General prioritizes the opioid epidemic
Opioid Masel Congress prepares to discuss the implementation of
J Pain BA, Barber GR, et al. Dis
M, Almas M, et al. Neuropathic pain responds better to increased doses of pregabalin: an in
R, National Survey in 2016 shows 2/3 of
Massachusetts Department of Public Health sent prescribers a
PainRelief@partners.org

In the News:
In the News
National Take Back Day October 28, to facilitate safe & convenient way to dispose unused prescription drugs, while educating the public.
Several drugs indicated for the treatment of Opioid-Induced Constipation are reviewed with updated prescribing indications by the FDA.
Opioid deaths continue to rise in Massachusetts, with 81% having illicit fentanyl in their system vs, 15% with prescribed opioid found at time of death.
Patient connects On-Q local anesthetic to his peripheral IV line, a potentially lethal error, that was identified & fixed by nurse before harm occurred.
Hydromorphone shortages reported by different companies without clear reasons given; and resolution estimates ranging from weeks to a year.
Maine cut prescribed opioids by 15% in past year although in that State, only 7% of fatal overdoses are linked to legitimate prescription.
International pain society denounces the use of brain imaging to diagnose chronic pain given its limitations, unclear specificity & legal/ethical concerns.
Two PCORI studies receive millions to expand access to non-drug pain relief strategies and help change prescriber habits.
Illicit fentanyl overdoses rose 5-fold in 3 years, exceeding deaths from heroin & prescription opioids (pending confirmation by the CDC).
National Survey in 2016 shows 2/3 of those who misuse opioids do so to treat pain with more than half obtaining pain pills from a friend or relative.
New Surgeon General prioritizes the opioid epidemic as an anesthesiologist & appointed the State Health Commissioner of Indiana by Pence.
McCaskill blames Insys, for its role in the opioid epidemic by misleading insurers into paying for Subsys (sublingual fentanyl) for cancer pain.
Congress prepares to discuss the implementation of CARA Act to combat the opioid crisis for a week in October; need is irrefutable, funding uncertain.
Massachusetts Department of Public Health sent prescribers a list of non opioid pain relievers, although many are off-label, with limited indications.

Journal Watch

Masel EK, Landthaler R, Gneist M, et al. Fentanyl buccal tablet for breakthrough cancer pain in clinical practice: results of the non-interventional prospective study ErkentNiS. Support Care Cancer. 2017; Aug doi: 10.1007/s00520-017-3853-y The safety, onset of action, potency & tolerability of transmucosal fentanyl has good-excellent effect on cancer pain for 89-99% of patients; was well tolerated; and cut breakthrough pain episodes.


**Policy overreliance on “morphine equivalent daily dose,” expecting precision from an imprecise tool** is problematic.

**Pediatric chronic pain: an important, costly & often neglected problem** for a children & adolescence whose pain will continue into adulthood.

The National Fibromyalgia & Chronic Pain Association web-based newsletter providing related information, advocacy & research.

Useful Narcan information for prescribers, pharmacists & others on prescribing, dispensing & educating about naloxone rescue kits.

White paper by the Nurse Practitioner Healthcare Foundation on Managing Chronic Pain with Opioids: A Call for Change

The American Society of Regional Anesthesia and Pain Medicine web page has valuable educational resources

The role of Substance P in transmitting pain signals, and related therapeutic targets are revisited despite early treatment failures.

Interesting presentation that explores the questions are perioperative opioids obsolete? & why is multimodal analgesia underutilized?


**Diet as a chronic pain treatment;** state of science review of how diet influences inflammation & subsequent pain sensitivity.

**Systematic review** showed that acupuncture, activity & other CIH approaches reduce headaches.

**Pilates helps with chronic low back pain** reduce pain, fear of movement, while improving core strength & overall functioning.

More than the “Placebo Effect” imaging studies suggest acupuncture changes the nervous system

Use of acupuncture in the Emergency Department for common ailments gains traction in Australia.

**Thurs, October 26th** biopsychosocial approach: Managing Pain from the Inside Out, offered by the Mass Pain Initiative. Marlboro, MA register

**Tue, November 14th** Essentials in Pain Management; Update 2017, from physiology to virtual reality, NY

**Fri, November 17th** Pain Care for Primary Care with excellent topics/speakers offered in San Francisco

**MGH Pain Resources**

The Patient Education Television: Dial 4-5212 from patient’s phone then order; see handbook 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;


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

MGH Pain Medicine: http://www.massgeneral.org/centerforpainmedicine/

MGH Palliative Care: http://www.massgeneral.org/palliativecare

MGH Formulary (includes patient teaching handouts in 16 languages): http://www.crtonline.com/cmsql/servlet/crtfrontline

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 Hospital

PainRelief@partners.org ● http://www.mghpcs.org/painrelief

To be added to or removed from the Pain Relief Connection mailing list, send an email to Paul Arnstein.