Pain Relief Connection

The Pain Information Newsletter

Provided by MGH Cares About Pain Relief, a program of Patient Care Services



Archived issues are available at http://www.MassGeneral.org/PainRelief

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In the News

- The NIH appointed a new <u>Interagency Pain Research Coordinating Committee</u> for 2 years. The duties listed are taken straight from the legislative language that the Pain Care Coalition championed
- The <u>Army Pain Management Task Force</u> report recommends a more comprehensive pain management strategy that includes holistic, multidisciplinary, and multimodal treatment of soldiers with acute and chronic pain.
- The DEA is soliciting comments about their restrictions on dispensing controlled substances in long term care.
- FDA approved a <u>once-weekly Buprenorphine</u> patch (C-III) for chronic pain patients using less than 80mg /day morphine equivalent. If patients use <30mg oral MS, start on a 5mcg/hr patch, otherwise start at 10mcg/hour.
- FDA approved a revision to the restrictive REMS plan & forms for the Transmucosal Fentanyl product Onsolis
- The FDA panel put forward its <u>proposed REMS</u> for extended release opioids that was <u>subsequently rejected</u> by an FDA advisory panel as not being robust enough to curtail drug misuse and abuse of these drugs.
- September 25th is declared the <u>National Drug Takeback Day</u>. See how <u>Montana did it</u>.

Journal Watch All items are accessible via MGH computers/library; MGHers can obtain other articles from through the Treadwell home page, go to 'Order Articles' under the 'Quick Picks' banner on the left.

- Sterling M, Hendrikz J, Kenardy J. (2010). <u>Compensation claim lodgement and health outcome</u> developmental trajectories following whiplash injury: A prospective study, *Pain*, *150* (1):22-28. Compensation claims seem to impede the recovery of those with mild to moderate pain, but are not detrimental to those with severe pain.
- Walton KD, Dubois M, Llinás RR. (2010). <u>Abnormal thalamocortical activity</u> in patients with Complex Regional Pain Syndrome (CRPS) Type I, *Pain*, *150* (1): 41-51. Dysrhythmic brain waves may diagnose CRPS
- McMurtry CM, Chambers CT, McGrath PJ, et al. (2010). When "don't worry" communicates fear: Children's perceptions of parental reassurance and distraction during a painful medical procedure, *Pain*, *150* (1):52-58. Distraction may be more important than reassurance, but children pick up on subtle cues of parental fear.
- Huijnen IPJ, Verbunt JA, Peters ML et al. (2010). Do depression and pain intensity interfere with physical activity in daily life in patients with chronic low back pain? Pain, 150 (1): 161-166. Functional measures are related, but can score patients lower on pain & depression levels than subjective ratings.
- Soler MD, Kumru H, Vidal J, et al. (2010) Referred sensations and <u>neuropathic pain following spinal cord</u> injury. *Pain*, 150 (1): 192-198. Patients with complete spinal cord injuries who report neuropathic pain also frequently have referred sensations to pinprick or touch below the level of their injury.
- CDC (2010). Emergency department visits involving <u>nonmedical use of selected prescription drugs</u> United States, 2004-2008 *MMWR June 18*, 2010 / 59(23);705-709. ED visits related to prescription opioids more than doubled & visits for nonmedical use of benzodiazepines increased by 89%. Oxycodone, hydrocodone, fentanyl and methadone were the opioids most commonly cited among 300,000 cases of nonmedical opioid use in 2008.
- Lovell MR, Forder PM, Stockler MR, et al. (2010) A randomized controlled trial of a standardized <u>educational</u> <u>intervention for patients with cancer pain</u>. *J Pain Symptom Manage*, 40:49-59. Cancer patients who received a booklet & video had fewer barriers to pain control, used more opioids but had no difference in pain or anxiety

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Journal Watch (continued)

- Kroenke K, Theobald D, Wu J, et al. (2010). Effect of <u>telecare management on pain and depression</u> in patients with cancer: a randomized trial. *JAMA.*, 304:163-71. Centralized telecare management coupled with automated symptom monitoring resulted in improved pain and depression outcomes that were sustained for at least a year.
- Lannersten L, Kosek E.(2010) <u>Dysfunction of endogenous pain inhibition during exercise</u> with painful muscles in patients with shoulder myalgia and fibromyalgia. The difference between myalgia and fibromyalgia may be related to the presence of a segmental versus a generalized dysfunction in the pain inhibitory system.
- Webster, L.R., Fine, P.G. (2010). Approaches to improve pain relief while minimizing opioid abuse liability. *Journal of Pain*, 11 (7):602-611. Excellent review and discussion of the strategies to balance benefits and risks.
- Walker LS, Dengler-Crish CM, Rippel S, et al. (2010). <u>Functional abdominal pain</u> in childhood & adolescence increases risk for chronic pain in adulthood. *Pain [ePub ahead of print.* Functional abdominal pain seen in children may represent a pain processing problem that put them at risk for adult chronic pain and headaches.
- Mercadante S. Villari P. Ferrera P. et al. (2010). The use of <u>opioids for breakthrough pain</u> (BTP) in acute palliative care unit by using doses proportional to opioid basal regimen. *Clin Journal of Pain*, 26(4):306-309. Over 90% of patients can get BTP relief within 15 minutes using either transmucosal fentanyl or IV morphine.

CAM

- Of those who use <u>Complementary & Alternative Medicine for Back Pain</u>, 60% perceived a great deal of benefits, while rating conventional medicine as generally unhelpful. Chiropractic care, yoga, tai chi, qi gong and acupuncture were rated more highly than massage, relaxation techniques and herbal therapies.
- Therapeutic touch was demonstrated to be feasible and safe to be used in a neonatal intensive care unit
- Spinal manipulation yielded less pain, disability and drug use over 1 year than physical therapy or back school
- Twice-weekly tai chi sessions reduce pain, while improving functioning and self-efficacy with knee arthritis.

Pain Resources on the Web

- A webinar on a <u>Joint Commission Medication Management</u> will help you meet the intent of the standards
- The VA updated their <u>Clinical Practice Guideline for the Management of Opioid Therapy</u> for Chronic Pain that was designed for use in an ambulatory care setting. The guideline provides all levels of pain management guidance from assessment to patient education, and includes helpful decision-trees.

Pain-Related Education Opportunities

- Wed-Sat Sept 8-11 Pain Week at the annual Pain Educators Forum with diverse curriculum in Las Vegas.
- Wed-Sat Sept 22-25, American Society for Pain Management Nursing 20th annual conference Minneapolis MN
- Tue-Fri Sept 21-24, American Academy of Pain Management annual conference & Pain Week in Las Vegas

MGH Pain Calendar

- Chronic Pain Rounds will resume Mondays at 12:00N on Sept 13th Mail: <u>DKallis@partners.org</u>
- Palliative Care Grand Rounds will resume Wednesday Sept. 22nd at 8:00am. Mail: nalawless@partners.org

MGH Pain Resources:

PainRelief web site: http://www.massgeneral.org/painrelief/

Previous issues of Pain Relief Connection: MGH Cares About Pain Relief Initiative

The MGH Center for Translational Pain Research: MGH Center for Translational Pain Research

Treadwell Library (Magic): http://magic.mgh.harvard.edu/

MGH Pain Medicine: Massachusetts General Hospital Department of Anesthesia, Critical Care and Pain Medicine - Clinical Services > MGH Pain Management

MGH Formulary (includes patient teaching handouts in 16 languages): http://www.crlonline.com/crlsql/servlet/crlonline

Partners Handbook: http://is.partners.org/handbook/
Primary Care Office InSite (PCOI) (Clinician and patient information): http://oi.mgh.harvard.edu/pcoi/frontpage_frames.asp

Intranet site for MGH use to locate pain assessment tools and policies. http://intranet.massgeneral.org/pcs/Pain/index.asp

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