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

- FDA releases the <u>REMS Blueprint</u> for Prescriber continuing education for prescribing long acting opioids
- CDC admits any public health steps to reduce prescription opioid overdose must also ensure access to pain care
- The IASP has posted the well validated and multilingual revised Faces Pain Scale on their website free for use.
- CNN Health expert answers a question about whether or not <u>Ketamine is a safe, effective pain relieving agent</u>.
- <u>Pain management at surgical centers</u> is good for business because of unmet needs and new treatment options.
- ISMP advice for preventing wrong-route epidural errors related to selection and labeling of tubing is provided.
- FDA will host a meeting on April 12, 2012 to discuss making naloxone more available to reduce opioid deaths

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

- Chan MT, Wan AC, Gin T, et al. (2011). <u>Chronic postsurgical pain after nitrous oxide anesthesia</u>. *Pain, 152* :2514-2520. Nitrous oxide given during surgery reduced the risk of chronic pain after surgery. Among those with severe chronic pain the strongest link was found with pain intensity >5/10 on the third day after surgery.
- Alschuler KN, Hoodin F, Murphy SL, et al. (2011). Factors contributing to physical activity in a chronic low back pain clinical sample: A comprehensive analysis using continuous ambulatory monitoring. *Pain*, *152*:2521-2527. <u>Pain sensitivity, fear of movement, and solicitous spousal responses</u> that foster overdependence account for the most differences in physical activity as measured in this study using a novel "Actiwatch" device.
- Leppert W. (2011). Pain Management in Patients with Cancer: Focus on Opioid Analgesics. *Curr Pain and Headache Rep, 15*:271–279. A review of the 25 year old <u>WHO analgesic ladder for cancer pain</u> management is done in light of new insights on pharmacokinetics, pharmacodynamics, drug interactions, and new drugs.
- Domenech J, Sanchez-Zuriaga D, Segura-Orti EE, et al. (2011). Impact of biomedical and biopsychosocial training sessions on the <u>attitudes</u>, <u>beliefs</u>, <u>and recommendations of health care providers about low back pain</u>: a randomised clinical trial. *Pain*, *152*: 2557-2563. Study shows that a strictly biomedical educational model yield maladaptive beliefs & outdated practices not seen when professionals have biopsychosocial training.
- McGrath PJ. (2011) Science is not enough: The modern <u>history of pediatric pain</u>. *Pain, 152 :*2457-2459 Historical view of how the interplay of science & public concern advanced the modern field of pediatric pain.
- Jimenez-Andrade JM, Ghilardi JR, Castañeda-Corral G, et al. (2011). Preventive or late administration of anti-NGF therapy attenuates tumor-induced nerve sprouting, neuroma formation, and cancer pain. *Pain, 152* (11) :2564-74. Certain forms (neuropathic, bone, sympathetic) of cancer pain may be preventable by targeting NGF
- Samuelson KA. (2011). Adult intensive care patients' perception of <u>endotracheal tube-related discomforts</u>: a prospective evaluation. *Heart Lung*, 40(1):49-55. Half of patients recall bothersome pain 5 days after having an endotracheal tube with 88% reporting discomforts as moderately/extremely stressful. Some discomforts persist.
- Badr H, Milbury K.(2011). Associations between depression, pain behaviors, and partner responses to pain in metastatic breast cancer. *Pain*, *152* (11):2596-604. Cancer patients rely on others for physical and emotional support, however significant others with punishing responses to expressed pain increase discomfort & distress.

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Journal Watch (continued)

- van Tilburg MA, Spence NJ, Whitehead WE, et al. (2011). <u>Chronic pain in adolescents</u> is associated with suicidal thoughts and behaviors. *J of Pain, 12*(10):1032-9. Clinicians should be aware that adolescents living with chronic pain are at increased risk for suicide ideation and attempts; that may not be related to depression.
- Pulles WL, & Oosterman JM. The Role of Neuropsychological Performance in the Relationship Between Chronic Pain and Functional Physical Impairment. *Pain Med. [Epub ahead of print]* For those with chronic pain, <u>high pain intensity slows mental processing</u>, while lowering physical performance & functional limitation.
- Lion LE, Cano A, Johansen AB. (2011). Sequential & Base Rate Analysis of Emotional Validation & Invalidation in Chronic Pain Couples: Patient Gender Matters *J of Pain*, *12* (11):1140-8. Husbands with pain are upset by spousal invalidation; but men (as patients or spouse) are more sensitive to partners' response.
- Andrade P, Visser-Vandewalle V, Philippens M et al. (2011). Tumor necrosis factor-α levels correlate with postoperative pain severity in lumbar disc hernia patients: Opposite clinical effects between tumor necrosis factor receptor 1 & 2. *Pain*, *152* (11):2645-52. Density of receptors types are linked to pain after back surgery.
- Black B, Herr K, Fine P, et al. (2011). The relationships among pain, nonpain symptoms, and quality of life measures in <u>older adults with cancer receiving hospice care</u>. *Pain Med*, 12: 880-889. Older adults with cancer have bothersome pain and other symptoms. Hospice care can lower pain, suffering, and QOL as death nears.
- Galinski M, Picco N, Hennequin, et al. (2011). Out-of-hospital emergency medicine in pediatric patients: prevalence and management of pain *Am J Emerg Med 29*, 1062–1066. Only a third of children come to the ER with pain but 2/3 of those present with severe pain. Children respond well to treatment, with 80% success rate.
- Simone CB 2nd, Vapiwala N, Hampshire MK, et al. <u>Cancer patient attitudes toward analgesic usage</u> and pain intervention. *Clin J Pain [Epub ahead of print]*. Many cancer patients with pain do not take pain medicine, but 94% seek alternative therapies. Reasons for non-use are prescriber recommendations, fear of addiction & cost.
- Hayashi Y, Kawaji K, Sun L, et al. (2011). Microglial Ca2+-Activated K+ Channels Are Possible Molecular Targets for the Analgesic Effects of S-Ketamine on Neuropathic Pain. J. Neurosci, 31: 17370-382. Ketamine is increasingly being used for neuropathic pain. This article describes its believed/potential pharmacodynamics

Pain Resources on the Web

- See the National Comprehensive Cancer Network 2011 Guidelines for Managing Cancer pain in Adults
- The <u>Center for Pediatric Pain</u> Research has a some resources and blogs for health professionals and families.

CAM (Complementary and Alternative Medicine)

- Learn steps to manage pain through better body mechanics and fitness.
- <u>Can ginger relieve some aches and pains</u>, either when used alone or in combination? Research is mixed.
- Examine the latest science on the <u>effectiveness and safety of selected headache remedies</u> and CAM practices.
- A 20-week <u>massage-myofascial release</u> fibromyalgia treatment program yields significant mind-body benefits.

Pain-Related Education Opportunities

- Sat-Sun Dec 17-18 Regional Conference of American Society of Anesthesiologists on <u>Acute Pain</u> New York
- Sat-Wed Jan 21-25, 2012 Cleveland Clinic's Annual Pain Management Symposium Las Vegas, NV

MGH Pain Calendar

- Chronic Pain Rounds occur weekly on Mondays at 12:00N Mail: <u>ttoland@partners.org</u> for details
- Palliative Care Grand Rounds occur weekly on Wednesdays at 8:00am. Mail: <u>nalawless@partners.org</u>
- Need-to-know Basics of Pain Management: Friday December 9th Founders 325 at 8-9am email for info
- Intermediate concepts in pain assessment and management 7:30 11:30am Thu Jan. 26th Founders 325
- Pain Champions: Improving to way pain is managed 7:30 11:30am Wed. February 22nd for information

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