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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

- Interpreting the data presented by <u>media on problematic prescription opioid abuse</u>. Consider who, what and why of opioid abuse / death.
- The effect of chronic pain on the nation's health & economy places it on a short list of 9 exemplar conditions that warrant better attention
- <u>Shortages of many medicines</u> are occurring across the country but the <u>FDA actions</u> to alleviate the problem do not prioritize analgesics.
- Those with chronic pain are sometimes forced to <u>accept invasive treatment options or else</u> lose access to medication they find helpful.

Journal Watch

All items are accessible via MGH computers/library. MGHers can obtain other articles from through the Treadwell home page

- Meghani SH, Polomano PC, Tait RC, et al. (2012) Advancing a National Agenda to <u>Eliminate Disparities in Pain Care:</u> Directions for Health Policy, Education, Practice, and Research. *Pain Medicine*, 13 (1):5-28. A call to action for the pain community to leverage provisions in the Affordable Care Act and other national initiatives to stop the social demographic & fiscal <u>disparities in access pain care</u>.
- Ramstad K, Jahnsen R, Skjeldal, OH. (2011) Characteristics of recurrent musculoskeletal <u>pain in children with cerebral palsy</u> aged 8 to 18 years *Developmental Medicine & Child Neurology*, 53: 013–1018. Chronic pain affects >80% of those with CP, increasing with age.
- Meghani SH, Byun E, Gallagher RM. Time to Take Stock: A Meta-Analysis and Systematic Review of <u>Analgesic Treatment Disparities</u> for Pain in the United States. *Pain Medicine* (ePub ahead of print). Disparities in care of Hispanics & African Americans well documented
- Schofield D, Kelly S, Shrestha R, et al. (2012). The <u>impact of back problems on retirement wealth</u>. *Pain, 153* (1):203-10. Those with chronic pain have 2% of the savings at retirement that those without chronic pain have; and one quarter of them were broke at age 65.
- Breuer B, Fleishman SB, Cruciani RA, et al (2011). Medical Oncologists' Attitudes and Practice in Cancer Pain Management: A National Survey. *J Clin Oncol*, 29(36):4769-4775. Cancer is feared because of the pain that afflicts most with the disease. Pain remains undertreated but the same barriers known for 20 years persist, including a reluctance to refer patients to pain or palliative care specialists.
- Ahmed AS, Li J, Erlandsson-Harris H, et al. (2012). Suppression of pain and joint destruction by inhibition of the proteasome system in
 experimental osteoarthritis. *Pain*, 153(1):18-26. Preclinical trials are encouraging for a <u>novel disease-modifying osteoarthritis drug</u>. In
 animals proteasome inhibitors reduce pain, swelling, stiffness, and the chemicals causing pain and inflammation with increases mobility,
- Sacide Yildizeli Topcu SY, Findik UY. (2012). Effect of <u>Relaxation Exercises on Controlling</u> Postoperative Pain. *Pain Manag Nurs, 13* (1): 11-17. Teaching relaxation exercises via noise-reducing headphones 2 hours after analgesia yielded significant reductions in pain.

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

- Rini C, Williams DA, Broderick JE et al. (2012) Meeting them where they are: <u>Using the Internet to deliver behavioral medicine</u> interventions for pain. *Translational Behavioral Medicine*, 1 (1): 1-11. This systematic review examines different types of internet sites designed to help people with chronic pain-related problems. There are difficulties in determining which type is best with current research
- Saastamoinen P, Laaksonen M, Kääriä SM,, et al. (2012). Pain and disability retirement: A prospective cohort study. *Pain, 153* (3): 526-531. When illness, occupation & other factors were controlled for, <u>chronic musculoskeletal pain is a strong predictor of early retirement.</u>
- Chapman CR, Davis J, Donaldson GW, et al. (2011) <u>Postoperative pain trajectories in chronic pain</u> patients undergoing surgery: the effects of chronic opioid pharmacotherapy on acute pain. *J Pain*, *12* (12): 1240-1246. Patients with chronic pain bad enough to require chronic opioid therapy are at high risk for higher intensity postoperative pain that lasts for days longer than for people without chronic pain
- Seshasai SRK, Wijesuriya S, Sivakumaran R, et al. (2012) <u>Effect of Aspirin on Vascular and Nonvascular Outcomes</u>: Meta-analysis of Randomized Controlled Trials. *Arch Intern Med*, 172(3):209-216. A high quality systematic review concluding that despite reduced deaths related to MI; in people without CVD, prophylactic aspirin did not reduce death, introduced risks of harm and should not be used routinely.

Pain Resources on the Web

- Good patient information on improving patient-provider communication including understanding the importance of preparation & behavior
- Articles & videos from American Academy of Pain Medicine <u>presentations on pain medicines</u> at this month's conference are available

CAM (Complementary and Alternative Medicine)

- Nice overview of <u>CAM for osteoarthritis</u>; citing evidence that patients benefit from specific forms of diet, exercise & mind-body therapy.
- There's a growing and solid base of research showing yoga benefits to people with back pain, rheumatoid arthritis and migraines.
- A telephone-based cognitive behavioral therapy program reduces muscular pain, depression, fear and self-reported disability.
- <u>Tai chi is beneficial</u> for people with fibromyalgia, recurrent headaches, chronic pain and even heart conditions.

Pain-Related Education Opportunities

- Wed, April 4, Drs Morgan & White speak on "Managing Pain in the Chemically Addicted Patient", in Marlboro, MA. (Mass Pl program)
- Wed-Thu May 30-31 the FDA is hosting a 2 day conference on Assessment of Analgesic Treatment of Chronic Pain Register to speak

MGH Pain Calendar

- Chronic Pain Rounds occur weekly on Mondays at 12:00N Mail: email Tina Toland for details
- Palliative Care Grand Rounds occur weekly on Wednesdays at 8:00am. email: Margaret Spinale
- Need-to-know Basics of Pain Management: Friday March 9th Founders 325 at 8-9am email for info
- Beyond the Basics of Assessing and Managing Pain Monday April 23rd Founders 325 at 7-11am email for info

MGH Pain Resources

The Patient Education Television: Dial 4-5212 from patient's phone then order: #279 for Chronic Pain; #280 for Cancer Pain; #281 for Communicating Pain; #282 for Prescription and Non-prescription Pain Medications; @3283 for Postoperative Pain 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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