

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

- The 9th Annual [NIH Pain Consortium](#) met to discuss latest research on [Biological & Psychological Factors that Contribute to Chronic Pain](#)
- [Marijuana dispensary physicians](#) are threatened with loss of their license to prescribe strong analgesics unless they sever dispensary ties.
- Funding Opportunity Announcement (FOA) is to encourage research needed to [understand chronic overlapping pain conditions](#).
- The [FDA Safe Use Initiatives](#) addresses many analgesic risks including : Acetaminophen; NSAIDs for elderly; Epidural Steroids & opioids.
- The development of [KRN5500 is expedited](#) to treat cancer or chemotherapy-induced neuropathic pain refractory to conventional analgesics
- Massachusetts [bill would expand access to detox](#) programs but create a bureaucracy that could make opioids for chronic pain inaccessible.

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

- Ogino Y, Kakeda T, Nakamura K, et al. Dehydration Enhances Pain-Evoked Activation in the Human Brain Compared with Rehydration. *Anesth Analg*. 2014 Jun;118(6):1317-25. [Dehydration increases pain-related brain activity](#). A ½ gallon oral rehydration solution helps.
- Auffert Y, Gouillou M, Jacob GR, et al. Does midazolam enhance pain control in pre-hospital management of traumatic severe pain? *Am J Emerg Med*. 2014 Jun;32(6):655-9. [Midazolam does not enhance pain control](#) if used with morphine; but increases overdose risk.
- Nicol AL, Wu II, Ferrante FM. Botulinum toxin type a injections for cervical and shoulder girdle myofascial pain using an enriched protocol design. *Anesth Analg*. 2014 Jun;118(6):1326-35. [Botox injections cut neck/shoulder pain](#) for half of patients. A 2nd dose improves results.
- Bennell KL, Egerton T, Martin J, et al. [Effect of physical therapy on pain and function](#) in patients with hip osteoarthritis: a randomized clinical trial. *JAMA*. 2014;311:1987-97. Active versus “placebo” physical therapy were no different in cutting pain and avoid side effects.
- Suh SY, Choi YS, Oh SC, et al. Caffeine as an adjuvant therapy to opioids in cancer pain: a randomized, double-blind, placebo-controlled trial. *J Pain Symptom Manage*. 2013 Oct;46(4):474-82. [Caffeine reduced pain](#) & sedation, slightly; not statistically significant.
- Lim TK, Shi XQ, Martin HC, et al. Blood-nerve barrier dysfunction contributes to the generation of neuropathic pain and allows targeting of injured nerves for pain relief. *Pain* 2014 May;155(5):954-67. Disruption of the blood-nerve barrier causes [post-injury neuropathic pain](#).
- Boerner KE, Birnie KA, Caes L, et al. Sex differences in experimental [pain among healthy children](#): A systematic review and meta-analysis *Pain*. 2014 May;155(5):983-93. Gender differences are subtle, but girls may be more sensitive to thermally-induced pain.
- Wallace LS, Wexler RK, McDougale L, et al. Voices that may not otherwise be heard: a qualitative exploration into the perspectives of primary care patients [living with chronic pain](#). *J Pain Res*. 2014 Jun 3;7:291-9. Patient’s describe how life is impacted by pain through photographs reflective of their lived experience of physical, mental, emotional & social struggles.

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 PainRelief@partners.org

Journal Watch [continued]

- Deyo RA, Dworkin SF, Amtmann D, et al. Report of the NIH task force on [research standards for chronic low back pain](#). *J Pain*. 2014 Jun; 15(6):569-85. Despite rapidly advances in science, the problem of disability due to chronic low back pain continues to increase. If we are to solve this public health problem, researchers need to standardize definitions, disease severity classes, minimum data sets & outcomes.
- Drew D, Gordon D, Renner L, et al. The [use of “as-needed” range orders for opioid](#) analgesics in the management of pain: A consensus statement of the American Society of Pain Management Nurses and the American Pain Society. *Pain Manag Nurs*. 2014 Jun;15(2):551-4. Provides guidance to safely adjust doses using range orders; which are necessary to afford flexibility to individualized analgesic therapy
- Fares KM, Mohamed SA, Abdel-Ghaffar HS. [High dose intrathecal morphine](#) for major abdominal cancer surgery: a prospective double-blind, dose-finding clinical study. *Pain Physician*. 2014 May-Jun;17(3):255-64. Higher dose (1mg) spinal morphine was more effective than those receiving lower intrathecal doses. Over 72 hours, less rescue opioid was used with no side effects difference between groups.
- Meulders A, Meulders M, Vlaeyen JW. Positive affect protects against deficient safety learning during extinction of fear of movement-related pain in healthy individuals scoring relatively high on trait anxiety. *J Pain*. 2014 Jun;15(6):632-44. High levels of positive affect buffer against the immobilizing impact of trait anxiety. Promoting [optimism helps lessen fear of safe movements](#) & extinguish inaction.

CAM (Complementary and Alternative Medicine)

- Learning how to [Pacing Activities](#) helps people with chronic pain prioritize activities based on values.
- [Kinesio-taping after knee surgery](#) is safe, cuts pain and edema, while improving functional rehabilitation.
- [Immersive Virtual Reality](#) is a rapidly emerging technology to reduce acute pain, but can it have a lasting effects on pain & functioning?
- Clarifying the concepts of Complementary, Alternative or Integrative Health Care. Why is [integrative care becoming more mainstream](#)?

Pain Resources on the Web:

- Check out the first freely available [cased-based learning module](#) from the NIH-sponsored Centers of Excellence in Pain Education
- TED Ed has a [5 minute video on pain](#) that helps explain some of the individual differences in the experience and response to treatments.

Pain-Related Education Opportunities

- Tue-Sat. Sept 2-6; [PAINWeek](#) offers over 120 CE hours on pain with a number of different tracks. The largest pain CE event .Las Vegas
- Wed-Sat Sept 17-20 The American Society for [Pain Management Nursing](#) will hold its 24th Annual conference in San Diego
- Mon-Tue Sept 29-30; The NIH examines The [Role of Opioids](#) in the Treatment of Chronic Pain. Attend free or watch live video cast

MGH Pain Calendar

- *Pain and Its Management at MGH* (Level I) – Fri July 11th. *Founders House 325* 8am – 9am. No registration required. [email for info](#)
- *Tools & Techniques for Effective Pain Management* (Level II) – Thur. Sept. 11th *Founders House 325* 1– 5pm [email for info](#).
- *Master Control of Pain* (Pain Champion) Fri. October 24th 8am – 4:00pm *Founders House 325* [email for info](#).
- *Palliative Care Grand Rounds and the Chronic Pain Rounds* will resume in the fall email: [Margaret Spinale](#) or [Tina Toland](#) respectively

GH 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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