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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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CIH		

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In the News

- FDA approves Xtampza ER, an extended release abuse deterrent oxycodone that can be taken by oral or feeding tube routes.
- The FDA welcomes email comments before a June 10, 2016 meeting to understand <u>patient perspectives of neuropathic pain</u>.
- Should all generic opioids have the same <u>abuse-deterrent properties</u> as name brands, or should they be banned from the market?
- MA had 1379 opioid overdose deaths in 2015 with 754 (54%) of cases screening positive for fentanyl which is often cut with heroin.
- Excise tax on opioids may fund the Comprehensive Addiction and Recovery Act to pay for addiction treatments.
- <u>Cigna plans to cut opioid therapy</u> by 25% through prescriber feedback, prior authorization, step therapy & larger co-pays.
- Opioid prescriptions have dropped an average of 18% since in 2012 across the country with drops seen in 49 states since 2013.

Journal Watch [MGHers can obtain articles through the Treadwell home page]

- Textor LH. Intrathecal pumps for managing cancer pain. *Am J Nurs*. 2016 May;116(5):36-44. The use of <u>intrathecal pumps to deliver low-dose opioid & adjuvant analgesics</u> is growing, yet nurses are often unfamiliar with the technology. <u>CE Credits available</u>.
- Esteve R, Ramírez-Maestre C, Peters ML, et al. <u>Development and initial validation of the Activity Patterns Scale in patients with chronic pain</u>. J Pain. 2016;17(4):451-461. Assessing pain avoidance, activity avoidance, task-contingent persistence and pacing behaviors in chronic pain patients using the new Activity Patterns Scale yields valuable clinical and research data about patients' affect and their adjustment to pain.
- American Society of Anesthesiologists et al. Guidelines for the prevention, detection, and management of respiratory depression associated with neuraxial opioid administration. Anesthesiology. 2016 Mar;124(3):535-52. Monitoring all patients getting neuraxial opioids for adequacy of ventilation (e.g. continuous oximetry) & sedation is necessary with additional monitoring warranted for those with known risk factors.
- Alford DP, German JS, Samet JH, et al. Primary care patients with drug use report <u>chronic pain and self-medicate</u> with alcohol and other drugs. *J Gen Intern Med*. 2016 May;31(5):486-91. Nearly nine out of ten people who abuse drugs or alcohol have chronic pain and most are using the substances for pain relief; including 51% of those using illicit drugs, and 81% engaged in non-medical use of prescription opioids.
- Larochelle MR, Liebschutz JM, Zhang F, Ross-Degnan D, et al. Opioid <u>prescribing after nonfatal overdose</u> and association with repeated overdose: a cohort study. *Ann Intern Med*. 2016;164(1):1-9. After a non-fatal overdose, 91% of patients continue to be prescribed opioids, with 17% overdosing again in 2 years. Some prescriptions may be warranted as 8% of those who overdosed again weren't prescribed opioids
- Simons LE. Fear of pain in children and adolescents with neuropathic pain and complex regional pain syndrome. *Pain.* 2016;157 Suppl 1:S90-7. An innovative approach to cutting pain-related fear in young CRPS patients by targeting key anatomic fear circuitry is discussed.
- Brown CA, Matthews J, Fairclough M, et al. Striatal opioid receptor availability is related to acute and chronic pain perception in arthritis: does opioid adaptation increase resilience to chronic pain? *Pain.* 2015 Nov;156(11):2267-75. A small study of arthritis patients' brain scans found opioid receptors & endorphins can be up-regulated despite severe or long-term pain to innately promote a natural form of resistance to pain.

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

- Goswami R, Anastakis DJ, Katz J, et al. A longitudinal study of pain, personality and brain plasticity following peripheral nerve injury. Pain. 2016 Mar; 157(3):729-39. Physiologic evidence shows overly-pessimistic thoughts render patients vulnerable to chronic pain.
- Williams H, Tanabe P. Sickle Cell Disease: A review of non-pharmacological approaches for pain. J Pain Symptom Manage. 2016 Feb;51(2):163-77. Use of non-pharmacological interventions for Sickle Cell pain show pain-reducing benefits with little potential harm.
- Day MA, Ehde DM, Ward LC, et al. An empirical investigation of a biopsychosocial model of pain in multiple sclerosis. Clin J Pain. 2016;32:155-163. Treating pain, fatigue, depression and insomnia simultaneously is advised to meet the comfort needs of those with M.S..
- Boesche, Bellan V, Moseley GL, et al. The effect of bodily illusions on clinical pain: A systematic review and meta-analysis. Pain. 2016 Mar;157(3):516-29. Bodily illusion techniques like mirror therapy, bodily resizing & functional prostheses may help pain for some conditions.
- Attal N, de Andrade DC, Adam F, et al. Safety and efficacy of repeated injections of botulinum toxin A in peripheral neuropathic pain: a randomised, double-blind, placebo-controlled trial. Lancet Neurol. 2016. 15: 555-65. Botox is safe & effective for neuropathic pain.
- Bonvanie IJ, Oldehinkel AJ, Rosmalen JG, et al. Sleep problems and pain: a longitudinal cohort study in emerging adults. Pain. 2016 Apr; 157(4):957-63. Population research shows sleep problems in 18-25 year olds may predict the onset of chronic pain & its severity years later.
- Treede, RD. Gain control mechanisms in the nociceptive system. Pain. 2016 Jun; 157(6):1199-204. The Gate Control Theory is updated to include "gain control" mechanisms to target supports the clinical and research observations of multimodal therapy effectiveness.

Pain Resources on the Web:

- Good explanation of why a biopsychosocial approach to chronic joint pain is needed to get arthritis sufferers better.
- Free updated online training on treating pain while mitigating risks of non-medical use and addiction is available.
- The use of <u>medications used to treat opioid addiction</u>; free view or purchase slides, <u>practice guidelines & tools</u>.
- IASP reviews helping those with joint pain move, and the most important advances in osteoarthritis pain over 15 years.
- Video describing the changes in thinking about using opioids and best advice for people taking opioid medication.
- Animated video differentiates the common experience of low back pain from the disease of chronic low back pain.

CIH (Complementary Integrative Health approaches; formerly called Complementary Alternative Medicine [CAM])

- Virtual reality and video games (especially violent ones) can increase pain tolerance and lower anxiety.
- Tai chi improves knee pain, functioning and lowers medication use similar to physical therapy.
- Peer-coaching via the iPeer2Peer program: successfully connects teens with chronic pain to help them cope more effectively.
- Patients with back pain treated with Mindfulness-Based Stress Reduction or CBT were less bothered by pain and functioned better at 1 year.

Pain-Related Education Opportunities

- Sun Tues, June, 5th 7th, 2016 International Conference on Opioids will review the latest evidence on benefits & harms. Boston, MA
- Mon Fri, June, 20th 24th, 2016 Evaluating & Treating Pain. Top-notch pain training through Harvard Medical School CME

MGH Pain Calendar

- Tools and Techniques for Effective Pain Management (Level II) Tuesday, June 7, 2016 Founders House 325 @ 8AM 1PM Sign-up.
- Palliative Care Grand Rounds are Wednesday mornings from 8AM 9AM, Ether Dome. email: Margaret Spinale for more information
- Chronic Pain Rounds in MGH Ether Dome. Email Tina Toland for details.

MGH 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 Pain Medicine: 🛭

MGH Palliative Care: l

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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