

# 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*

- Over three hundred patients in 18 States were [sickened by contaminated epidural steroid injection](#) with 25 deaths reported to date.
- Meningitis outbreak raises questions about the risks, costs and benefits of [epidural steroid injections](#) administered to relieve back pain.
- The International Association for the Study of Pain has released its [Interprofessional Education Curriculum](#) for health professional training
- The [Ameridose](#) voluntary shutdown in the wake of the NECC-related meningitis outbreak is having an [impact on the drug supply](#)
- The IASP announced this as the [Global Year Against Visceral Pain](#) with many fact sheets and useful information in different languages

## *Journal Watch*

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

- Toth C, Mawani S, Brady S, et al. (2012). An enriched-enrollment, randomized withdrawal, flexible-dose, double-blind, placebo-controlled, parallel assignment efficacy study of [Nabilone as Adjuvant in the Treatment of Diabetic Peripheral Neuropathic Pain](#). *Pain*, 153 (10):2073-82. A cannabinoid improved many aspects of neuropathic pain. Including pain relief, sleep efficacy, and quality of life.
- Buga S, Sarria SE, (2012). The management of pain in metastatic bone disease. *Cancer Control*, 19 (2): 154-166. Excellent review of [metastatic bone pain management](#) using available pharmacological and nondrug approaches and a multidisciplinary approach.
- Hiller A, Helenius I, Nurmi E, et al. (2012). [Acetaminophen improves analgesia](#) but does not reduce opioid requirement after major spine surgery in children and adolescents. *Spine*, 37 (20):1225-31. Pediatric patients undergoing spine surgery who got IV acetaminophen (30mg/kg) had a lower incidence and a shorter duration of severe postoperative pain without adding side effects.
- Craven P, Cinar O, Madsen T. (2012). Patient anxiety may influence the efficacy of ED pain management. *Am J Emerg Med*. [Epub ahead of print] [Anxious patients were more demanding, got more analgesics, but were less satisfied](#) with pain treatment. Treat anxiety!
- Salinas GD, Robinson CO, Abdolrasulnia M. (2012) Primary care physician attitudes & perceptions of the [impact of FDA-proposed REMS](#) policy on prescription of extended-release and long-acting opioids. *J Pain Research* 5: 363–369. Only 8% of PCPs fully understand the opioid REMS. Many are wary of further governmental monitoring & regulations that add costs which may limit access to pain care.
- Gan TJ, Daniels SE, Singla N, et al. (2012). A novel injectable formulation of diclofenac compared with intravenous ketorolac or placebo for acute moderate-to-severe pain after abdominal or pelvic surgery: A multicenter, double-blind, randomized, multiple-dose study. *Anesth Analg*. 2012 Nov;115(5):1212-20 , [IV Diclofenac provides comparable analgesia to ketorolac](#) and reduces doses of opioids used.

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

- Chen ML, Cao H, Chu YX, et al. (2012). Role of P2X7 receptor-mediated IL-18/IL-18R signaling in morphine tolerance: multiple glial-neuronal dialogues in the rat spinal cord. *J Pain.*, 13(10):945-58. Although a preclinical study, it validates the importance of glia-neuron interaction in the spinal cord to modulate pain. It also raises the important possibility that [glia may be one mechanism of drug tolerance](#).
- Choi YS, Shim JK, Song JW, et al. (2012). Combination of pregabalin and dexamethasone for postoperative pain and functional outcome in patients undergoing lumbar spinal surgery: A randomized placebo-controlled trial. *Clin J Pain.* [ePub ahead of print]. Combined administration of [pregabalin and dexamethasone works synergistically](#) to reduce pain and speed return to normal activity after surgery.
- Kravitz RL, Tancredi DJ, Jerant A, et al. (2012). [Influence of patient coaching on analgesic treatment adjustment](#): secondary analysis of a randomized controlled trial. *J Pain Symptom Manage.* 2012;43:874-84. Using a Tailored Education and Coaching method, 15% more patients with severe cancer pain had analgesic treatments changed compared with those receiving usual care. Even without an analgesic change, patients getting the intervention did better at 3 months than those without tailored education and coaching.
- Gillis VL, Senthinathan A, Dzingina M, et al. (2012). Management of an acute painful sickle cell episode in hospital: summary of NICE guidance. *BMJ.* 27;344:e4063 Updated guideline on [sickle cell pain control in hospitals validates the need](#) for vigilant assessment, prompt treatment (often requiring opioids) and close monitoring every 30 minutes for until safe, effective control is achieved.

## *Pain Resources on the Web*

- CO\*RE is the [Collaborative on REMS Education](#) that brought experts together to develop this needed self-directed learning activity
- The Institute for Safe Medication Practices has a nice patient education checklist for [transdermal fentanyl safety](#)
- Good example of a respectful [brief discussion with a heroin addict](#) using SBIRT (Screening, Brief Intervention, and Referral to Treatment)

## *CAM (Complementary and Alternative Medicine)*

- [Cognitive Behavioral Therapy is a beneficial](#) for chronic nonspecific back pain, helps the person in many measures of improvement
- Palmitoylethanolamide (PEA), [an endogenous fatty acid amide, may help](#) a variety of inflammatory or neuropathic pain states.

## *Pain-Related Education Opportunities*

- Tue November 20<sup>th</sup> [Hospice and Palliative Care Update](#) for the specialist team has breakout sessions on pain and symptom management
- Sat Nov 17<sup>th</sup> 5-6 pm session added to ASRA meeting on [Meningitis Epidemic Epidural Steroid Injections Update](#) in Miami
- Tue Jan 22<sup>nd</sup> 3:45 – 9pm [Chronic Pain: Coordinating Risk Assessment with the Management of Complex Pain Conditions](#) Waltham MA

## *MGH Pain Calendar*

- Fri. November 9<sup>th</sup> *Need-to-know Basics of Pain Management*: Mass General Founders 325 at 8-9am email [for info](#) of just drop in
- Mon November 19<sup>th</sup> 11am – 3pm, *Beyond the Basics of Pain Management* Founders 325 email [for info](#)
- Fri January 18<sup>th</sup> 11am – 3pm, *Mastering Control of Pain in a Selected Population* O'Keeffe Auditorium email [for info](#)
- *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](#)

## **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](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](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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To be added to or removed from the Pain Relief Connection mailing list, send an email to [PainRelief@partners.org](mailto:PainRelief@partners.org)