

Restoring Quality of Life: Managing Side Effects/Pain Control

Pain Management for Patients and Caregivers

Biren Saraiya, MD

I. Key Points

Pain control is desirable and in most cases achievable, and there are many choices for pain therapy, which may include pharmacology and non-pharmacological therapeutics. What pain control requires is frequent reassessment on the part of physicians and clinicians but also on the part of the patient and advocate to tell the physician I am having pain, or my loved one is having pain and it's not controlled adequately. We also need to do a better job of addressing the concerns of patients.

II. Goals of Care

The goal in cancer treatment is to cure the cancer, but if we cannot, the next and only goal is to palliate the symptoms—that is to control the cancer and the side effects of the cancer therapy to optimize how well one lives with the cancer. Pain management is an integral part of that.

III. Pain

Patients with the same exact insult may not have the same pain, and pain affects how well patients feel. Pain is also under reported because sometimes clinicians don't ask the right questions or because there are concerns. Pain compromises function, and pain control requires knowledge on the part of both the patients and the clinicians. It is a team approach. Patients need to understand what the expectations and goals are and what things the doctor is looking for to get the pain under control. Many patients have concerns about the side effects of pain control medications.

IV. Pain Therapeutics

1. Non-Pharmacological

There are many approaches to control pain. There are non-pharmacological approaches such as heat or cold, exercise, which you have to be careful with but is a good way to get patients to feel less pain, radiation and surgery. There are also different delivery systems for pain medications such as pain pumps, IV or patches.

2. Pharmacological

There are very well known medications such as ibuprofen, Naproxen and Tylenol. On a pain scale, anything more than a four is moderate, and anything more than a seven is severe. The other way to think about pain is how it is interfering with your life. Other choices include opioids, which are

available in short-acting and long-acting forms. Long-acting medications are given to keep the pain from happening. Short-acting medications are those given if you know you're going to have the pain and you take it before, or you can take it after also. Antidepressants help with sleep and mood and can be utilized in conjunction with pain control medications. Anti-seizure medications may also be helpful for patients who are experiencing pain due to nerve damage.

V. Understanding Opioids

Opioid medications, things like morphine, oxycodone, OxyContin, Dilaudid, and Methadone, work on all different types of pain. Just because you start morphine doesn't mean that we are trying to kill you. My concern regarding addiction is very low for patients with cancer. I may be more aware in my patients with an addiction history, and I will pay attention to it and discuss it with my patients.

Most side effects only last a few days, and then the patient's body adjusts to it. The one side effect that does not go away is constipation, and the thing to do is to make sure that you let your doctor know if you haven't had a bowel movement if it is out of the ordinary for one to two days. Patients who get opioid medications should be on a bowel regimen, something to soften the stools to make sure they are going regularly. The most common error clinicians make in giving pain medication is that when a patient's pain is not controlled or gets worse, changes should be in percentages, not absolute numbers. Dosing should be based on what your goal is so that patients can do what they want to do—the least amount of pain with the most amount of function.

VI. Professional Help

Work with your treatment team to meet your goal with regards to pain management, and make sure it is your goal and not the doctor's goal. Ensure that the treatment team meets your goals. If the goals are not met, ask for help. If your doctor is not getting things done, ask for a specialist.