

# 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

- 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 [patient perspectives of neuropathic pain](#).
- Should all generic opioids have the same [abuse-deterrent properties](#) 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.
- [Cigna plans to cut opioid therapy](#) 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 [intrathecal pumps to deliver low-dose opioid & adjuvant analgesics](#) is growing, yet nurses are often unfamiliar with the technology. [CE Credits available](#).
- Esteve R, Ramirez-Maestre C, Peters ML, et al. [Development and initial validation of the Activity Patterns Scale in patients with chronic pain](#). *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 [chronic pain and self-medicate](#) 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 [prescribing after nonfatal overdose](#) 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.

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

## **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 [medications used to treat opioid addiction](#); free view or purchase slides, [practice guidelines & tools](#).
- 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, 5<sup>th</sup> – 7<sup>th</sup>, 2016 [International Conference on Opioids](#) will review the latest evidence on benefits & harms. Boston, MA
- Mon – Fri, June, 20<sup>th</sup> – 24<sup>th</sup>, 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](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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