TITLE: Pain Management

Topic: 13 (2)

Pain management is a common issue in palliative care. Many patients and families express a fear of inadequate pain control at EOL, therefore clear communication and prompt attention to managing pain is required to address suffering. Proper assessment and management of pain can be instrumental in developing trust and an effective care giving partnership.

Pain Assessment is the primary step in determining the underlying cause(s) of pain. A thorough pain assessment involves a physical exam and a symptom history using a systematic approach such as the (Fraser Health symptom assessment acronym O,P,Q,R,S,T,U and V, see Assessment module)
http://www.fraserhealth.ca/health-professionals/professional-resources/hospice-palliative-care/accessed Mar. 24, 2017.

Pain assessment often incorporates the use of a visual analog scale (ESAS) to enable the patient/family to rate the pain at a given point in time which can then inform the effectiveness of the analgesia. There are also scales for non-verbal patients and small children. Family can be a valuable source of information for assessment in these situations.

Analgesia by the WHO ladder

- Stepped approach.
- ATC around the clock (every 4 hours).
- With a breakthrough (BT) dose (every hour) -usually 10% of 24-hour dose or 50-100% of the every 4 hourly dose.
- If greater than 3 BT doses in 24 hours discuss with prescriber, may request order to increase the ATC dose.
- If greater than 3 BT in a row with little effect then contact physician to re-evaluate current regime.

Other considerations

- Caution in patients with renal failure
- Slow and low with frail elderly
- Communicate well to alleviate fear about Narcotics/Opioids
- Monitor for common side effects

Common side effects with Narcotics/Opioids

- Constipation, nausea (when initiated), dry mouth, pruritus.
- Somnolence
- Confusion if advanced may lead to Delirium (hallucinations, decreased attention, agitation)
- Myoclonus if untreated may lead to seizures

Observe carefully and monitor effectiveness after administration of analgesia