

TITLE: Pain Management

Topic: 13 (3)

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 Management basics:

- Analgesia should be achieved by using proportionate dosing of the “right” medication(s)
- Assessment of the classification and intensity of pain is first priority
- Remember that it is quite common to have more than one type of pain and both require attention
- ATC dosing with breakthrough

The WHO pain ladder explained:

Step 1: Non-opioid +/- Adjuvant - for treatment of mild pain

Step 2: Mild Opioid +/- Non-Opioid, +/- Adjuvant - for treatment of mild to moderate pain

Step 3: Moderate to Strong Opioid +/- Non-Opioid, +/- Adjuvant - for treatment of moderate to severe pain

An adjuvant medication is any medication that augments the effect(s) of another medication, or treats a component of the pain mechanism such as inflammation.

Medications commonly used to treat pain:

Non-Opioids

NSAIDS; Ibuprofen, ASA, Steroids, Antidepressants, TCA, Anticonvulsants, Gabapentin Bisphosphates, Pamidronate <http://palliative.org/NewPC/pdfs/education/99QuestionsEbook2013.pdf>

Opioids

Step 2: Tramadol, Codeine, Oxycodone

Step 3: Morphine, Hydromorphone, Methadone, Fentanyl, Sufentanyl

Non-medicinal pain management options:

- Massage, TENS, acupuncture
- Quiet environment, meditation
- Physical activity as tolerated
- Surgery and radiation