



# PAIN RELIEF CONNECTION THE PAIN INFORMATION NEWSLETTER

Provided by MGH Cares About Pain Relief, a program of MGH Patient Care Services

## Inside this issue:

In the News.....	Page 1
Journal Watch.....	Page 1-2
CIH.....	Page 2

Pain Resources on the Web.....	Page 2
Pain Education Opportunities.....	Page 2
MGH Pain Calendar & Resources.....	Page 2

## In the News

- Gottlieb speaks to rising gabapentinoid abuse and the [benefits of a national e-prescribing system for opioids](#).
- Similarities & differences between the [methamphetamine & opioid crises](#) are delineated.
- FDA approves [Apadaz for acute pain](#) up to 14 days. Digestive enzymes convert benzhydrocodone, to hydrocodone.
- US Too! The federal government joins counties, cities & states [suing drug manufacturers for addiction costs](#).
- [Opioid overdose deaths in Massachusetts declines 8%](#) in 2017. Fentanyl (83%) & Heroin (43%) still most common.
- [True or false?](#) “Alternatives to opioids do exist; we just need to use them.” Fact check examining the best available research.
- National Quality Forum [opioid stewardship playbook](#) to support safe, opioid prescribing. See [guide](#) & [summary](#).
- [Trump’s initiative to stop opioid abuse](#) emphasizes cutting opioid quotas, non-opioid analgesia, strict law enforcement & addiction services.
- Pfizer’s manufacturing issues combined with DEA production quotas have created a [hospital opioid shortage](#) unlikely to resolve soon.
- We need help [transitioning pain patients to non-opioid; non-drug methods](#) to manage pain more safely & effectively.
- The [2018 ACPA Resource Guide to Chronic Pain Management](#) conveys best practices in an easy to read format for patients & professionals.

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

- Brat GA, Agniel D, Beam A, et al. Postsurgical prescriptions for opioid naive patients and association with overdose and misuse: retrospective cohort study. *BMJ*. 2018;360:j5790. [Prescribed postoperative opioid abuse](#) rates < 1% among over a million patients studied over time. Age 15-24 and duration of exposure (especially 2 weeks – 2 months after surgery), rather than dose predicts abuse.
- Krebs EE, Gravely A, Nugent S, et al. Effect of [opioid vs nonopioid medications on pain-related function](#) in patients with chronic back pain or hip or knee osteoarthritis pain: The SPACE randomized clinical trial. *JAMA*. 2018;319:872-882. A year of treatment with opioid monotherapy ( $\leq$  100mg oral morphine/day) did not improve pain-related functioning better than nonopioid multimodal therapy. Conclusions should include caveats that 26% of nonopioid patients received tramadol and twice as many “nonopioid” patients screened positive for illicit drugs and received mental health services more than their opioid counterparts. Pain difference was 0.5/10 points.
- Chidambaran V, Subramanyam R, Ding L, et al. Cost-effectiveness of intravenous acetaminophen and ketorolac in adolescents undergoing idiopathic scoliosis surgery. *Paediatr Anaesth*. 2018 Mar;28(3):237-248. Adding [IV acetaminophen with or without ketorolac](#) to an opioid after pediatric spine surgery resulted earlier feeding & less constipation while lowering costs by \$510 to \$947 per patient.
- Vivolo-Kantor AM, Seth P, Gladden RM, et al. Vital Signs: Trends in Emergency Department Visits for Suspected Opioid Overdoses — United States, July 2016–September 2017. *MMWR Morb Mortal Wkly Rep*. 2018 Mar 9;67(9):279-285. [Suspected opioid overdoses](#) presenting to the ED increase by 30% in a year; with potency of illicit drugs (fentanyl/ heroin) driving increases.
- Faerber J, Zhong W, Dai D, et al. Comparative Safety of Morphine Delivered via Intravenous Route vs. Patient-Controlled Analgesia Device for Pediatric Inpatients. *J Pain Symptom Manage*. 2017;53:842-850. Examining safety data of 109,000 patients 5-21 year old across 42 [pediatric hospitals](#), [PCA morphine was slightly safer](#) other ways of delivering IV morphine; with fewer than 1% requiring CPR.

MGH Cares About Pain Relief  
Massachusetts General Hospital

[PainRelief@partners.org](mailto:PainRelief@partners.org) • [Previous Newsletters](#)

To be added to or removed from the Pain Relief Connection mailing list, send an email to [Paul Arnstein](#)

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

- Cruccu G, Nurmikko TJ, Ernault E, et al. Superiority of capsaicin 8% patch versus oral pregabalin on dynamic mechanical allodynia in patients with peripheral neuropathic pain. *Eur J Pain*. 2018 Apr;22(4):700-706. Patients treated with [Qutenza vs pregabalin](#) had greater reduction in neuropathy-associated allodynia & area of pain. Twice as many had complete resolution of allodynia with the capsaicin 8% treatment.
- Resende L, Merriwether E, Rampazo ÉP, et al. [Meta-analysis of transcutaneous electrical nerve stimulation for relief of spinal pain](#). *Eur J Pain*. 2018 Apr;22(4):663-678. Inferential Current or Transcutaneous Electrical Nerve Stimulation reduces pain for those with chronic neck or low back pain; but only during stimulation times. Relief not sustained 1-3 months & no functional benefits found. Better quality studies needed.
- Gressler LE, Martin BC, Hudson TJ, et al. Relationship between concomitant benzodiazepine-opioid use and adverse outcomes among US veterans. *Pain*. 2018 Mar;159(3):451-459. Adverse outcome risks are 35% higher [when benzodiazepines are co-prescribed with an opioid](#).
- Sites BD, Harrison J, Herrick MD, et al. [Prescription opioid use and satisfaction](#) with care among adults with musculoskeletal conditions. *Ann Fam Med*. 2018 Jan;16(1):6-13. Musculoskeletal pain patients were more satisfied if they got at least 1 opioid prescription during prior year.
- Lin XH, Young SH, Luo JC, et al. Risk factors for upper gastrointestinal bleeding in patients taking selective COX-2 Inhibitors: a nationwide population-based cohort study. *Pain Med*. 2018 Feb 1;19(2):225-231. Over a 3-year period, [Coxib users have 37% higher risk of GI bleeding](#) than controls, with age, male gender, kidney, liver, GI disease and taking aspirin or other NSAIDs associated with higher risks.
- Macfarlane GJ, Barnish MS, Jones GT. Persons with chronic [widespread pain experience excess mortality](#): longitudinal results from UK Biobank and meta-analysis. *Ann Rheum Dis*. 2017 Nov;76(11):1815-1822. Persons with chronic widespread pain are 2.5 times more likely to die within 5 years as those without pain; especially from cardiovascular or cancer-related complications.
- Doo AR, Shin YS, Yoo S, et al. Radiation induced neuropathic pain successfully treated with systemic lidocaine administration. *J Pain Res* 2018;11 545–548. Case study of 2 year struggle with [neuropathic pain controlled by systemic lidocaine](#) & markedly lower opioid doses.

## Pain Resources on the Web:

- International statement on [evidence-based use of opioids](#) is released to reduce suffering related to underutilization or overuse.
- [Opioids being developed with “biased agonism”](#) that works on pain receptors but not the receptors that suppress respirations.
- The power of [media’s influence on public perception](#) has changed policy related to the way chronic pain is treated.

## Complementary Integrative Health (formerly called Complementary Alternative Medicine [CAM])

- [Tai Chi or Physical Therapy](#) improve pain/functioning when repeated 2-5 weeks; with continuing exercise yielding more benefits.
- [Mindfulness & relaxation-based eHealth interventions](#) can improve patients' general health & psychological well-being.
- A [graded activity program for elders](#) cut pain, catastrophizing & avoidance behavior; while functioning improved.
- [Battlefield style acupuncture](#) in the Emergency Department is showing promise as a method of treating acute low back pain.

## Pain-Related Education Opportunities

- Sat, April 7<sup>th</sup>, [Integrative Pain Management Conference](#): National Experts, Local Focus. Burlington, VT
- Wed – Sun, April 25 – 28<sup>th</sup>, [Managing Acute and High-Impact Chronic Pain Through Multidisciplinary Care](#) Vancouver
- Sun, April 29<sup>th</sup>, Integrative Approaches to Pain Management, including nutrition, mind-body & complementary methods. Boston, MA [More info](#)
- [The 17<sup>th</sup> World Congress on Pain](#)<sup>®</sup> (the largest Pain education & research event on earth) in Boston, MA, September 12 – 16, 2018.

## MGH Pain Calendar

- *Tools and Techniques for Effective Pain Management* – Tuesday, April 17, 2018 *Founders House 325 @ 8AM – 1PM* [Sign-up](#) here.
- Palliative Care Grand Rounds are Wednesday mornings from 8AM – 9AM, Ether Dome. Email: [Margaret Spinale](#) for more information.
- MGH Interprofessional Pain Rounds 12 – 1pm Jackson 412 on 1<sup>st</sup> & 3<sup>rd</sup> Wednesdays as scheduled. Email [Tina Toland](#) for more information.

### MGH Pain Resources

The Patient Education Television: Dial 4-5212 from patient’s phone then order: see handbook <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://www.massgeneral.org/centerforpainmedicine/>

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>

**MGH Cares About Pain Relief**  
Massachusetts General Hospital

[PainRelief@partners.org](mailto:PainRelief@partners.org) ● <http://www.mghpcs.org/painrelief>

To be added to or removed from the Pain Relief Connection mailing list, send an email to [Paul Amstein](#)