



EDUCATIONAL RESOURCES

Pain 101: Symptom Management Tips with a Palliative Care Focus

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 HOME HEALTH  HOSPICE



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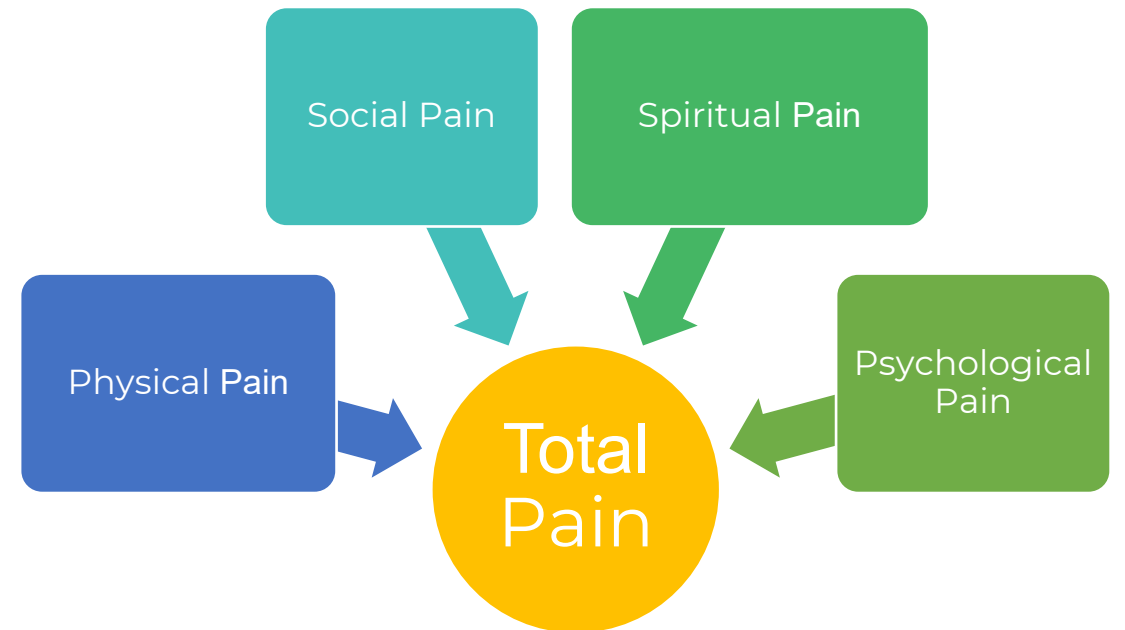


Objectives

- Review pain and pain assessment tools
- Differentiate between nociceptive, neuropathic, and nociplastic pain
- Identify appropriate non-pharmacologic and pharmacologic therapies based on clinician assessments

Pain

- “An unpleasant sensory or emotional experience associated with actual or potential tissue damage”
- “Whatever the patient says it is”
- Multifactorial symptom impacting the whole person, family, and caregivers
- Acute
- Chronic



Paice, 2019.

Hospice Quality Measures

- NQF #1634 Pain Screening

- Measure Description: Percentage of patient stays during which the patient was screened for pain during the initial nursing assessment.

- NQF #1637 Pain Assessment

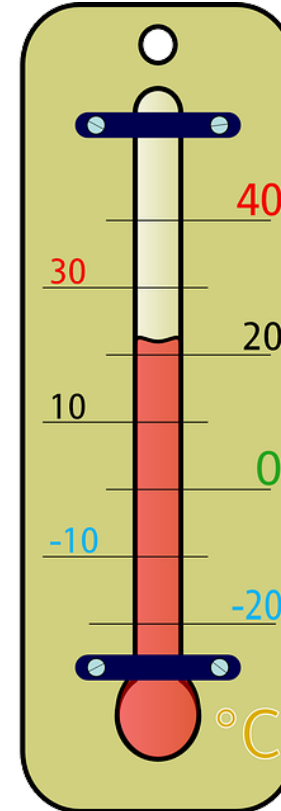
- Measure Description: Percentage of patient stays during which the patient screened positive for pain and received a comprehensive assessment of pain within one day of the screening.



CMS.gov
Image: Pixabay.com

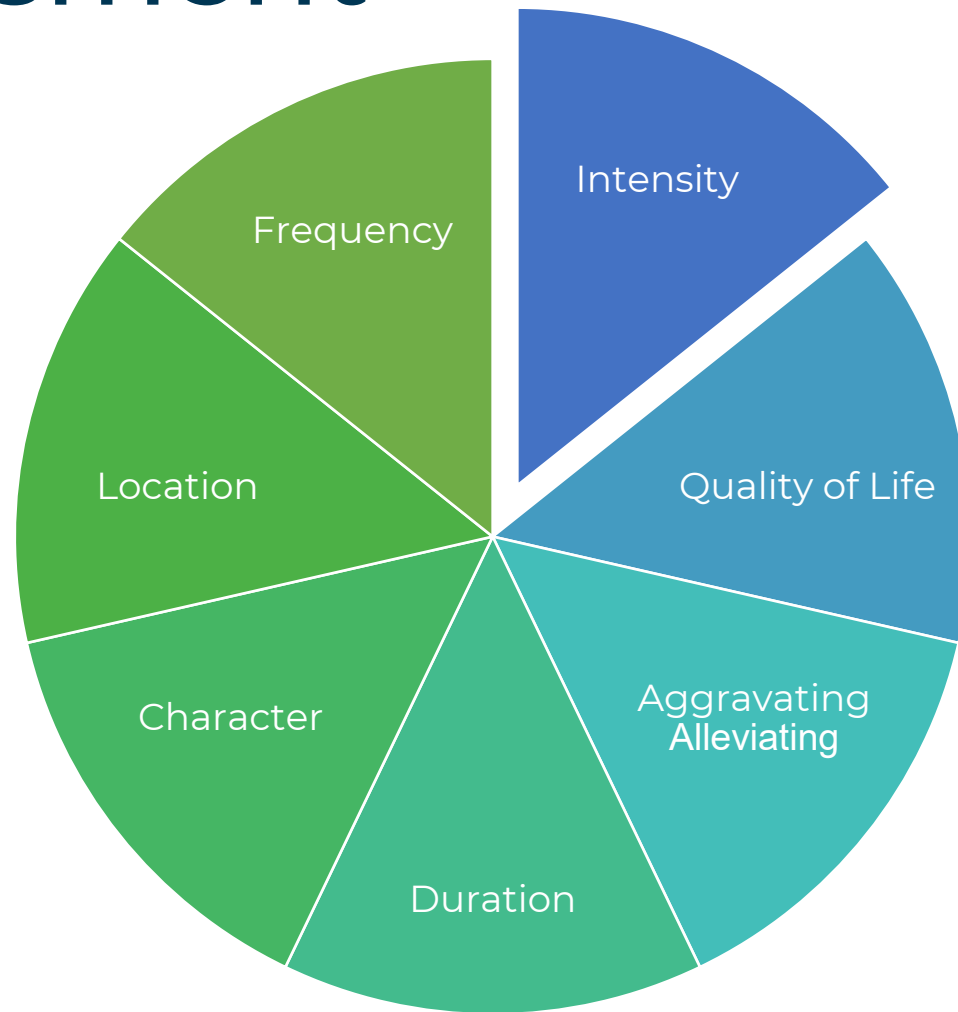
Pain: Intensity

- Pain Intensity Assessment Tools
 - Visual Analogue Scale
 - Numeric Rating Scale
 - Verbal Descriptor Scale
 - FACES Scale (Wong-Baker)
 - Faces Pain Scale- Revised
 - Pain Thermometer



Fink, 2019.
Image: Pixabay.commo

Pain: Assessment



Fink, 2019.
Image: Pixabay.com

Pain Assessment

P

- Provocative or palliative factors

Q

- Quality

R

- Region or radiation

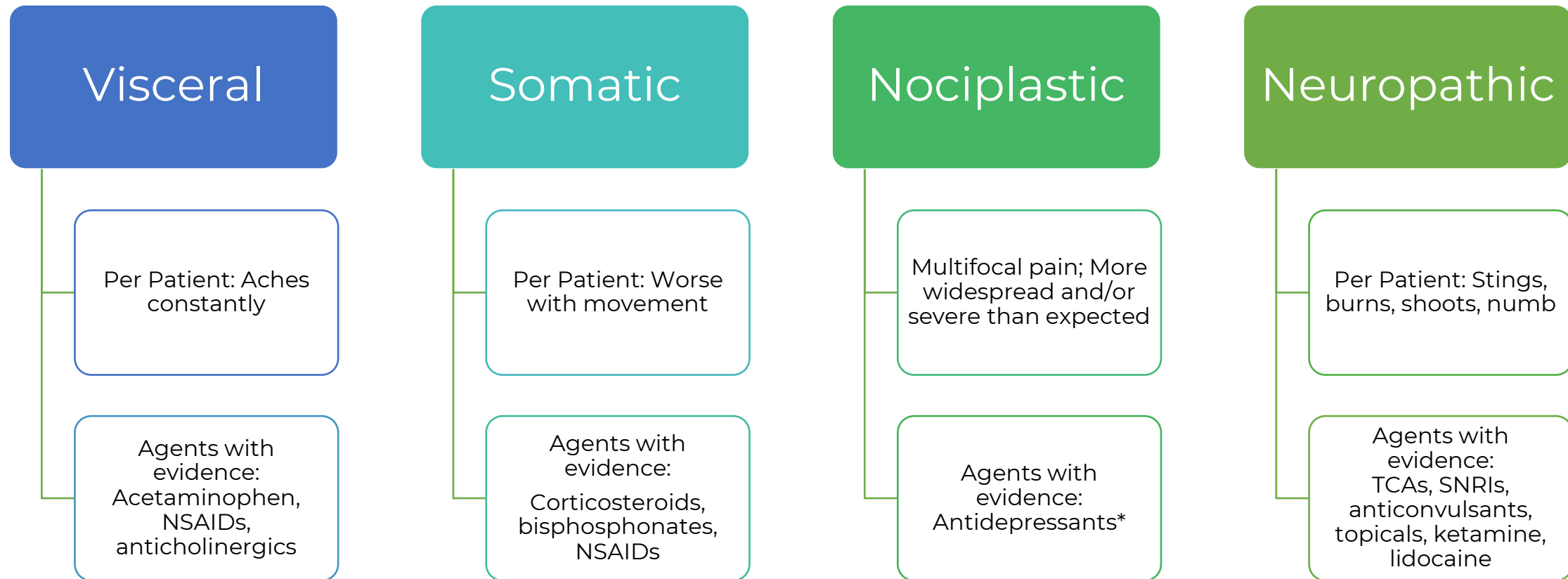
S

- Severity

T

- Timing

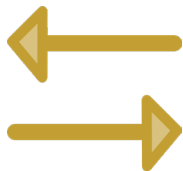
Adjuvant Analgesics



Curseen, 2020.

World Health Organization (WHO)

- Acetaminophen
 - NSAIDs
 - Opioids
 - Adjuvants
 - Interventions: injections, radiofrequency ablation, spinal cord stimulators, intrathecal/epidural pain pumps
- Non-pharmacologic therapy
 - Physical therapy: aqua therapy, massage
 - TENS
 - Scrambler therapy
 - Music therapy
 - Pain psychology: guided imagery, cognitive behavior therapy, biofeedback
 - Exercise



Anekar, 2023.
WHO
Image: Pixabay.com

Medication Titration

Dose
Increase

- Insufficient efficacy
- Acceptable tolerability

Dose
Reduction

- Efficacious
- Unacceptable tolerability

McPherson, 2018.

Nociceptive Pain

- Acetaminophen
 - Mild pain or fever
 - Cost-effective formulations: tablets, capsules, suppositories, oral liquids
- Anti-Inflammatory Agents
 - NSAIDs
 - First Line: Ibuprofen, Naproxen
 - Alternatives: Meloxicam, Celecoxib, Diclofenac, Sulindac, Oxaprozin, Piroxicam
 - Avoid: Ketorolac, Indomethacin
 - Corticosteroids
 - First Line: Dexamethasone, Prednisone
 - Formulations: oral tablets, oral concentrate, oral elixir

Neuropathic Pain

- Anticonvulsants
 - First Line: Gabapentin
 - Others: Pregabalin, Carbamazepine, Oxcarbazepine
- Antidepressants
 - Tricyclic antidepressants (TCA)
 - Agents: Amitriptyline, Nortriptyline, Imipramine, Doxepin
 - Serotonin-Norepinephrine Reuptake Inhibitors (SNRI)
 - Agent: Duloxetine

Opioids: Mild to Moderate Pain

- Acetaminophen/Opioid Combination
 - Acetaminophen/Hydrocodone
 - Acetaminophen/Oxycodone
- Buprenorphine
- Tramadol
- Tapentadol
- +/- Adjuvant Therapy



Opioids: Severe Pain

- Fentanyl
- Hydromorphone
- Methadone
- Morphine
- Oxycodone
- Oxymorphone
- Tapentadol
- +/- Adjuvant Therapy



Opioid Efficacy

Analgesia

Assessment of effectiveness

Activities

Engagement in activities that provide acceptable QOL

Adverse Effects

How are side effects impacting QOL?
Management plan?

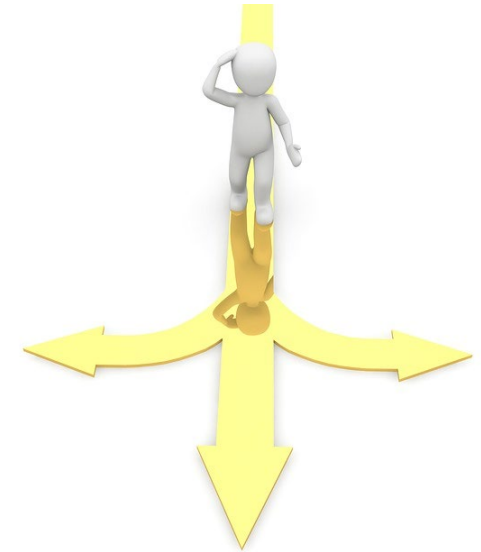
Aberrant Drug Behaviors

Are there signs of substance use disorder?

Passik, 2004.
Curseen, 2020.

Opioid Rotation

- Switching to a different opioid analgesic when inadequate response to one opioid or adverse effects become intolerable
- Improved pain control
- Decreased intensity of adverse effects
- Failure to respond to an opioid \neq patient will not respond to others
- Incomplete cross-tolerance



McPherson, 2018.

Opioid Spotlight: Methadone

- Available as: tablet, oral solution, parenteral
- Lipophilic (accumulation in tissues)
- Onset after oral dosing: 15-45 minutes
- Peak after oral dosing: 2-4 hours
- Duration of action: 8-12 hours
- Oral bioavailability: 80%
- Elimination half-life: 20-40 hours (average)
- About five days to reach steady state



Pain Management

- Goals of care
- Non-pharmacologic therapy
- Medication appropriateness
- Disease progression
- Monitoring and reevaluation
- Communication strategies



Image: Pixabay.com.



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Thank you

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