

Pain Centers of Iowa, P.C.

CEU presentation September 9th 2015

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Goals for class

- ▶ What is the definition of Chronic Pain?
- ▶ Pain, not a vital sign, pain and emotions, how are they inter-twined?
- ▶ Cognitive Behavioral Therapy (CBT), how can this help the pain patient?
- ▶ What are some of the concerns for those who treat chronic pain with opioid type therapies?
 - ▶ Iowa statistics
 - ▶ National statistics

What do you think?

- ▶ When you hear “Pain Clinic” what do you think about?
- ▶ Do you know someone in pain?
- ▶ Keep your hands raised- how many of those are family members?
- ▶ How has this personally impacted you and your family?
- ▶ What would you wish for, for them?

- ▶ (Open talking intersession)

What is Chronic Pain?

- ▶ About 100 million Americans suffer from chronic pain , defined as pain that lasts longer than six months. Chronic pain can be mild or excruciating, episodic or continuous, merely inconvenient or totally incapacitating.
- ▶ With chronic pain, signals of pain remain active in the nervous system for months or even years. This can take both a physical and emotional toll on a person.

Chronic Pain definition continued

- ▶ The most common sources of pain stem from headaches, joint pain, pain from injury, and backaches. Other kinds of chronic pain include tendinitis, sinus pain, carpal tunnel syndrome, and pain affecting specific parts of the body, such as the shoulders, pelvis, and neck. Generalized muscle or nerve pain can also develop into a chronic condition.
- ▶ Chronic pain may originate with an initial trauma/injury or infection, or there may be an ongoing cause of pain. Some people suffer chronic pain in the absence of any past injury or evidence of body damage

Types of pain

- ▶ Nociceptive: injury or surgery- acute lasting a normal amount of expected time to recover. Usually less than 6 months.
- ▶ Neuropathic: swelling from chronic illness, chemotherapy, diabetes, bundled nerves.
 - ▶ Is it mechanical? (Images required).
- ▶ Mixed: an injury that has caused a bundle of nerves - Migraines example

How does your brain process pain? (simplified)

- ▶ Brain, sensory neurons, spinal cord, thalamus, limbic system, motor neurons.
- ▶ Pain signals from sensory fibers travel up the spinal cord (freeway) to your thalamus connecting sending messages to the motor neurons (causing your reaction).
- ▶ Example: You set your hand accidentally on the hot stove... 1,2 JUMP.

Neuropathic Pain

- ▶ Medical personnel must have to ask....
 - ▶ Is it mechanical in nature?
 - ▶ Rule out by imaging
 - ▶ Do we know the source?
 - ▶ Describe the pain
 - ▶ Burning
 - ▶ Stabbing
 - ▶ Decide which neuromodulating medicine to attempt

Emotional response to pain

- ▶ The limbic system (which helps us have emotions) is right next to the thalamus system that receives the sensory nerve information.
- ▶ It is thought that because of this, that everyone's pain is interpreted based on their own emotions and ability to cope.
- ▶ Using a person's vital sign (5th vital sign) to tell whether someone is in pain or not. Is that reliable?
- ▶ Treating pain is only related to the ability to improve function and nothing else.
- ▶ This is where a patient's support system and ability to cope emotionally come in to play.

Example of emotion's impact

- ▶ If I hit 5 of you on your knee with an object.... You all will have different reactions.
 - ▶ Why?
 - ▶ Because you all have such different life experiences, support systems and backgrounds.
 - ▶ Now, I hit one person hard on the knee while she's holding onto a million dollar winning lottery ticket.
 - ▶ How does that person react?
 - ▶ Now if I hit that same person and tell her I also ran over her dog...
 - ▶ How does she react now.
 - ▶ MOOD, STATE OF MIND, ABILITY TO COPE PLAY A HUGE ROLE.

Cognitive behavioral therapy

- ▶ CBT therapy is used to help many people with different types of issues.
- ▶ This tool is used by qualified counselors to assist patients' expectations.
 - ▶ Expectations and poor ability to cope will keep people circling the ineffective side to treatment.
 - ▶ Patients typically don't realized how depressed they are and end up taking many different type of medications to sleep, one to assist with muscle spasms and then pain. This is dangerous- getting them emotional support is critical.
 - ▶ Setting expectations and getting multiple drug classes weaned to the minimum will be helpful.

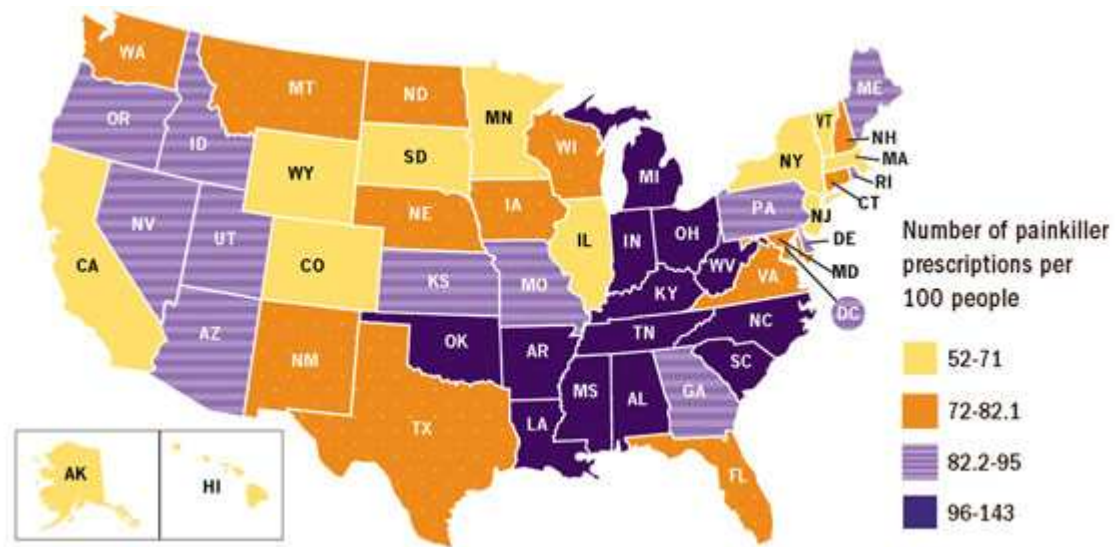
How do providers decide to treat with opioids?

- ▶ After a complete physical evaluation pin pointing the person's pain generator, we establish their support system and evaluate their history.
- ▶ PCI's goal is to connect people to the right intervention to avoid the need for pain medicines.
- ▶ If the pain is mechanical in nature, the diagnostic imaging will let a provider know if surgery is needed, and or a procedure prior to avoid surgery is needed and possibly both.
- ▶ Opioids are typically not given for neuropathic pain, buy anti-seizure (neuromodulators) medication classes are preferred to assist the burning nerve feeling this pain often produces.

Interventions to consider:

- ▶ Spinal cord stimulators, Kyphoplasty, Transforaminal Epidurals, Medial Branch Blocks, Radiofrequency ablations and Intrathecal pain pumps
 - ▶ What are those?
 - ▶ How do those help?
 - ▶ How long does it last?
 - ▶ Who is qualified to do them?

National statistics of opioid usage



2012 Data from CDC

- ▶ Each day, 46 people die from an overdose of prescription painkillers* in the US.
- ▶ Health care providers wrote 259 million prescriptions for painkillers in 2012, enough for every American adult to have a bottle of pills.
- ▶ 10 of highest prescribing states for painkillers are in the South.

Focusing on diagnosing pain

- ▶ PCI is committed to treating the pain generator, optimizing the function of each patient.
- ▶ Creating a personalized pain relief program is needed for each patient.
- ▶ Monitoring and getting patient buy in, commitment is always a struggle.
- ▶ PCP physicians need to support pain providers, close the back door and stay in touch.
- ▶ Pain management providers have varying qualifications- Anesthesia trained, with pain Board Certification is considered top care criteria.
- ▶ Not all pain physicians are trained to do all procedures- please make sure to check your pain provider's credentials and broad treatment tools.

Getting pain relief quickly



Physician: John B. Dooley MD

- ▶ Board Certified in Anesthesia, Critical Care Medicine and Pain Management.
- ▶ Review our website for a list of procedures and videos: www.pcipain.com
- ▶ Follow us on twitter at Painchat
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- ▶ Feel free to contact us with any questions: info@pcipain.com

- ▶ We are here to help your community.
- ▶ 563.344.1050 to be scheduled at any of our clinics.

Thank You-

