

## THE PATIENT CHANNEL PRESENTS – Managing Chronic Pain

### **Dr Bruce Dan**

People suffering with chronic pain experience both physical and emotional discomfort and long term pain almost always leads to changes in their behavior and lifestyle. They may also experience changes in their relationships. Hello I'm Dr. Bruce Dan Executive Director for The Patient Channel. Dealing with pain can lead to depression, anxiety and much more. Our program Managing Chronic Pain will clarify when to get help and where to find it. In addition to traditional pain medications we look at other alternatives to help patients regain their lives.

### **Narrator**

Chronic pain has been Andrew Nemeth's constant companion since the 23-year-old college student was a teenager.

### **Andrew Nemeth, Patient**

"It goes throughout my whole stomach and doesn't go away and it has just been like this for about eight years now."

### **Narrator**

Patients are typically asked to rate the intensity of their pain on a scale of 1 to 10. For Andrew, the answer is usually the same.

### **Andrew Nemeth, Patient**

"I am always at about a 7 - a 7 or 8."

### **Narrator**

Andrew is not alone. Chronic pain can affect anyone, regardless of age, gender or race. It can also have numerous causes. Janet Garrett suffers from fibromyalgia, a poorly understood but painful disorder that disproportionately affects women.

### **Janet Garrett, Patient**

"My arms would hurt so bad. The best way that I could describe it to the doctors was that they just ached so badly that I wanted to take them off and hang them up."

### **Narrator**

With the help of caring specialists, courageous patients like Andrew and Janet are learning to manage their pain and regain control of their lives. Plus medical breakthroughs are leading to novel therapies, providing even more hope for people with chronic pain.

Everyone feels physical discomfort at some point in their lives. But for 50 million Americans, pain is an agonizing part of each day. Described by experts as a silent epidemic, chronic pain is the leading cause of adult disability in the United States, accounting for more than \$100 billion annually in healthcare costs and lost productivity.

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Yet statistics only tell part of the story.

Dr. Bruce Nicholson, a pain specialist at Lehigh Valley Hospital in Allentown, Pennsylvania, says individuals with chronic pain often have a diminished ability to concentrate, making it difficult for them to work or socialize. This can lead to depression, isolation and a loss of self-esteem.

### **Bruce Nicholson, MD/Lehigh Valley Hospital**

“Chronic pain becomes more than just a physiologic problem...Chronic pain can lead to alterations in sleep – alterations in how you do things on a daily basis...

What we find is these individuals become somewhat helpless as far as trying to control their pain...In a sense it is like looking in the mirror at yourself and seeing your pain in the mirror and saying ‘I can’t control this – I have no control over my pain.’”

### **Narrator w/animation**

When we experience pain, we’re actually experiencing an elaborate relay of signals that travel rapidly through our bodies. For instance, if we prick our finger with a pin, nerves carry a message to the spinal cord that something has penetrated the skin. This message is then sent on to the brain, which recognizes that a painful stimulus has occurred.

### **Narrator**

Cancer patient Marlene Russek knows her bouts of severe pain have an important purpose.

### **Marlene Russek, Patient**

“Sometimes my pain can be my friend. It warns me that something is wrong, whether it’s the cancer or something else. As the cancer gets worse so does the pain and it’s a warning sign. It tells me when something new is coming up. ”

### **Narrator**

Pain can be broken into two broad categories: acute and chronic. Acute pain from an injury or surgery eventually goes away as part of the normal healing process.

But chronic pain may last for months, years... or a lifetime.

### **Bruce Nicholson, MD/Lehigh Valley Hospital**

“If we look at traditionally what the definition of chronic pain is – it’s persistent pain for more than three to six months after onset.”

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### **Narrator**

Dr. Jeffrey Gudin is director of pain management at Englewood Hospital and Medical Center in Englewood, New Jersey. He says the type of pain that people feel depends on the source of the discomfort.

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“Pain feels different based on where in the body it comes from. So if you cut your skin that is going to feel different than if you burn your skin. And that is going to feel different than if you have a stomachache or an ulcer...”

You have to figure out what kind of pain it is so you have an idea of how to treat it. We don’t have a blanket or a shotgun approach to treat pain. Each of the types of pain has individual therapies. And if you don’t what kind of pain it is, it is going to be impossible to figure out the appropriate treatment.”

### **Narrator**

Lower back pain is a leading cause of chronic pain.

### **Bruce Nicholson, MD/Lehigh Valley Hospital**

“Back pain is probably the most common presenting pain complaint of individuals in the United States and probably in most industrialized countries around the world...”

At some time or another, 80 percent of us will have a complaint of back pain that we will present to our family physician for some type of treatment...

If you’ve had one episode of back pain, there is probably a 60 to 80 percent chance that some time in your life you’ll have a recurrence of that back pain.”

### **Narrator**

People who spend a lot of time sitting, such as office workers or truck drivers, are among those most at risk for chronic back pain.

### **Bruce Nicholson, MD/Lehigh Valley Hospital**

“The sitting position actually puts more stress on the lower back than any other position you can be in standing or lying down.”

### **Narrator w/text information graphics**

Other common causes of chronic pain include:

- Arthritis
- Bone and joint pain
- Muscle pain
- Fibromyalgia
- Cancer

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### **Narrator**

Next we'll focus on how healthcare providers and patients can work together to accurately assess and successfully treat chronic pain.

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### **Narrator**

Researchers like Roger Fillingim at the University of Florida have discovered that pain is a profoundly personal sensation.

All of us feel it – just not in the same way.

### **Roger Fillingim, PhD.**

“There are tremendous individual differences in the perception of pain. We can deliver the same heat-pain stimulus to 10 different people and we will get vastly different ratings.”

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“One of the difficulties in defining pain is that feels different for everyone...”

Pain is so subjective and it is so variable...A pain score of 8 over 10 for you is not the same as a pain score of 8 over 10 for me.”

### **Narrator**

Measuring the level of pain that a person is experiencing poses a challenge for healthcare professionals - as in this test that records the level of tolerance for heat stimulus.

### **Roger Fillingim, PhD.**

“If we want to measure blood pressure, that's easy. If we want to measure blood-sugar or many other disease-related end points, we have a gold-standard measure of those things.

Pain, in general, is considered a personal subjective experience. And so we rely on the individual to convey to us their experience of pain.”

### **Bruce Nicholson, MD/Lehigh Valley Hospital**

“The majority of what you can understand about the distress and the characteristics of somebody's pain are determined by asking actually the right questions.”

### **Narrator**

Some physicians recommend that patients keep a daily pain diary.

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“One of the ways we ask patients to measure their pain is to keep track of it.”

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### **Narrator**

Andrew Nemeth has seen a lot of doctors since he began enduring excruciating intestinal pain at age 15.

### **Andrew Nemeth, Patient**

“I would just kind of faint and black out because of the strong pain.”

### **Andrew Nemeth, Patient**

“The doctors were a little baffled at first. They weren’t really sure why, what was happening and why.”

### **Narrator**

Many pain patients have had similar experiences of going from one physician to another.

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“Most pain patients see between four and six other doctors before they make it to a pain management specialist...”

### **Narrator**

Andrew was originally diagnosed with a severe case of ulcerative colitis. He later underwent a 12-hour operation on his colon that resolved a medical crisis but failed to relieve his chronic pain.

### **Andrew Nemeth, Patient**

“I’ve had physical therapy to try and help move the muscles around and help with the pain. I’ve also taken pain medicine...”

It’s helped a little bit. It’s helped me do things on a day-to-day life that I wouldn’t be able to do without the medicine and without the physical therapy.”

### **Narrator**

Although pain limits his ability to compete, Andrew is an athlete at heart who still enjoys shooting hoops.

He hopes to work in the sports industry after graduating from Ramapo College with a degree in public relations and marketing. It is a goal that is taking longer than he expected to accomplish.

### **Andrew Nemeth, Patient**

“If it weren’t for my sickness, I definitely would have graduated two years ago. I’ve had to drop many classes because of the pain and because of my sickness.”

### **Narrator**

But Andrew isn’t giving up.

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In addition to working with a pain management doctor, Andrew continues to see other specialists in hopes of finding a cure for the mysterious intestinal malady that causes his discomfort.

Health permitting, he intends to finish his classes in the next year or so.

### **Andrew Nemeth, Patient**

“If I didn’t have my sickness I’d you know I’d succeed in life and this isn’t going to stop me from succeeding in life.”

### **Narrator**

Because of the pain from fibromyalgia, Janet Garrett had to retire from her job as a postmaster.

### **Janet Garrett, Patient**

“I did have to go through a period of adjustment. And when I finally realized that I couldn’t do the things that I had done in the past – that I didn’t have the stamina, I didn’t have the strength or whatever - I think I went through a period of grieving. You know, it was depressing you know. I didn’t feel like I was that old, and, I can’t do this or that or the other. It just didn’t seem fair.”

### **Narrator**

Janet relies on a combination of exercise, stretching and biofeedback to alleviate her pain.

### **Janet Garrett, Patient**

“I know there’s more than four letters in exercise, but that’s a four-letter word, and uh, but it’s just important. You know, I’ve got to face the fact that, that’s what I’ve got to do.”

### **Narrator**

Experts say that an active lifestyle that includes plenty of exercise can be one of the best remedies for pain. Specific forms of physical therapy are particularly helpful for people with back problems.

### **Bruce Nicholson, MD/Lehigh Valley Hospital**

“Lifestyle is the No. 1 cause for chronic back pain in our population. Alterations and changes in our lifestyle in the form of becoming more active physically, probably address a lot of back pain that individuals have.”

### **Narrator**

Educating patients about their pain and teaching them coping skills are strategies that have proven to be effective.

**Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“The better educated patients are, the better they are able to manage their disease. Well guess what? Their doctors’ visits go down, their emergency-room visits go down, their hospitalizations go down, their phone calls to the doctor’s office go down – so we’re all pleased with that – their medications use goes down.”

**Roger Fillingim, PhD.**

“If I’m a patient with chronic low back pain and I’ve been inactive for two and half years and I’m moderately depressed and I don’t have a job a pill is not going to fix all that.

A pill might help me with my pain but I need physical therapy to rehabilitate myself. I might need psychological treatment to learn new pain coping skills and to improve my depression. “

**Narrator**

Janet says determination and a positive outlook also are extremely useful tools for managing her pain.

**Janet Garrett, Patient**

“The attitude plays a big part and you have to do the things that make you feel better and help you get stronger, and that’s when I started with the exercising and the stretching because that builds up my strength and makes me more capable to go ahead and do the things that I want to do.”

**Narrator**

Unfortunately, many chronic pain patients require more than exercise, education and a good attitude to deal with their unceasing discomfort. Coming up, we’ll learn about the benefits – and possible drawbacks – associated with pain-killing medications.

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**Narrator**

Like 90 percent of patients with advanced stages of cancer Marlene Russek has severe chronic pain that is currently being treated with narcotic medications. Marlene was diagnosed with cancer four years ago and had a double mastectomy. She is now undergoing radiation therapy to treat malignant nodules in her chest. While her pain is being effectively managed, she knows she will eventually need more medicine.

**Marlene Russek, Patient**

“I know the cancer is going to get worse down the road and I want to save the heavy stuff. I mean there are a lot of good medicines out there, but I want to save

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it for the end. Because I don't want to be a vegetable. I just want to be comfortable because I want to be active...

Each person has to find that balance in their own life – what's good for them - because if you're active and you're happy – that is going to be the best pain-killer.”

### **Narrator**

Because quality of life is a significant concern as they battle the malignancy, health care providers want cancer patients to have access to the medicine they need to remain comfortable.

As she continues her fight against cancer, Marlene Russek tries to take as little pain medication as possible. She credits her husband Steve for helping her through the tough times.

His comments at a recent support group meeting sent her spirits soaring.

### **Marlene Russek, Patient**

“They asked him what brings him the most joy in life – what he likes to do. And he said – and this is after 25 years of marriage – he goes ‘I love opening up my eyes and looking at my wife and seeing my wife's face the first thing in the morning.’ I thought that was the most beautiful thing in the world...”

How could you not fight pain with having all of this around you – you have so much love all around you.”

### **Narrator**

A vast array of medications is available to treat varying types of pain.

For example, a number of over-the-counter remedies can effectively relieve occasional aches and pains. But frequent and long-term use of these products may ultimately cause harm.

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“As beneficial as they are for some pain states, the public has to be careful with just using Tylenol or ibuprofen at their own discretion without discussing it with your doctor.”

### **Narrator**

Many chronic pain patients take prescription drugs to improve their quality of life. But publicity about a small number of patients who have abused or become addicted to painkillers and increased government scrutiny has made some physicians reluctant to prescribe these narcotic medications.

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**Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“There are a lot of sensitivities around prescribing morphine-like drugs...

For the longest time, we reserved our morphine-like drugs for only cancer patients. But we recognized that there are patients with severe pain who are going to live a long time and it truly is unfair to let them suffer...”

**Narrator**

Dr. Gudin believes the attention focused on recent instances of abuse has overshadowed the benefits associated with prescription painkillers.

**Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“I think that the opioid analgesics have taken a bad rap in the last few years...

Opioids are probably the most effective class of medicines that we have to treat any kind of pain across the board. It works for bone, muscle and joint pain. It works for internal organ pain. It works neuropathic pain.”

**Narrator**

For patients with severe and intractable chronic pain, such as individuals with spine problems and associated nerve pain, oral painkillers may not be enough. In these cases, a more direct approach is needed.

Using x-ray images for guidance, Dr. Gudin injects medicine around the roots of irritated nerves in the spine.

**Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

“Sometimes we’re surprised and the injections will last six months, a year or longer. But usually it is a couple of weeks to a couple of months.”

**Bruce Nicholson, MD/Lehigh Valley Hospital**

“The most important advice for somebody with chronic back pain is to be patient. And to understand that quite often there is not a quick cure to their back pain.”

**Narrator**

While surgery is usually viewed as the last resort for chronic-pain patients, it can provide lasting relief for certain individuals

– especially those who are suffering from joint damage related to arthritis and other diseases.

Each year 435,000 Americans undergo hip or knee replacement surgery and in 90 percent of cases, the operation is deemed a success.

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### **Narrator**

Up next we'll learn about other exciting medical advances that could help improve the lives of people in chronic pain.

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### **Narrator**

Adults tend to experience more pain as they age. And with millions of Baby Boomers on the cusp of retirement, the need for effective pain management will surely grow.

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

"We are going to have more pain as the population gets older."

### **Narrator**

Fortunately, medical researchers are making great strides in developing novel treatments for chronic pain.

Some of the advances involve drugs previously approved for treating other medical problems.

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

"One of the exciting areas for the future is new therapies for pain.

There are medicines, which have pain-relieving benefits that weren't invented to be pain pills. Things like seizure medicines – it turns out that most of the seizure medicines take away nerve pain. Classes of medicine like the anti-depressants are very effective in certain types of pain."

### **Narrator**

At the same time, new techniques are being employed to improve the delivery of existing painkilling medications.

### **Jeffrey Gudin, MD/Englewood Hospital and Medical Center**

"We have medications now that you can place in your mouth and they work within minutes. We have medications where you take just one tablet and it lasts 24 hours or longer. We have patches that last three days or longer."

### **Narrator**

While surgery is usually viewed as the last resort for chronic pain patients, advances also are being made in this area. One example is an endoscopic procedure to treat spinal compression fractures.

### **Bruce Nicholson, MD/Lehigh Valley Hospital**

"Now we actually have techniques where we can go in and put a small amount of cement in the vertebrae that has collapsed and stabilize that vertebrae. Literally within 48 hours a person with a compression fracture can go from being bed-ridden to standing and walking."

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### **Narrator**

If left unchecked, chronic pain can be an agonizing nightmare leading to despair and isolation. But today healthcare providers have more and better treatment choices than ever before to manage pain.

### **Narrator w/information text graphics**

If you are experiencing problems with chronic pain, here is contact information for several organizations that may be able to help:

American Academy of Pain Management

[www.aapainmanage.org](http://www.aapainmanage.org)

(209) 533-9744

American Pain Foundation

[www.painfoundation.org](http://www.painfoundation.org)

1-888-615-PAIN (7246)

American Pain Society

[www.ampainsoc.org](http://www.ampainsoc.org)

847-375-4715

American Chronic Pain Association

[www.theacpa.org](http://www.theacpa.org)

800-533-3231

National Pain Foundation

[www.nationalpainfoundation.org](http://www.nationalpainfoundation.org)

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