

Pain therapy adjustment

When taking medication for chronic pain you should have regular contact with your doctors and nurses to monitor your pain control and modify the doses of painkiller you are taking, if needed. In some cases the type of drug or the way you take your painkillers may need to be changed or other drugs, called adjuvants, may be added to help control your pain.

Safety

The use of opioids for chronic pain does not cause addiction and is safe when managed according to established clinical guidelines. There are some side-effects, such as constipation or drowsiness, associated with these treatments and it is important you discuss them with your doctor in advance.

Further information

Cicely Saunders Institute

Macmillan Information and Support Centre for patients with progressive illness and their families
www.csi.kcl.ac.uk/support

Hospice Information

An information service where you can find information about local hospice and palliative care services.
www.hospiceinformation.info

CancerHelp UK

Reliable, easy to understand patient information from Cancer Research UK
www.cancerhelp.org.uk



NTNU – Trondheim
Norwegian University of
Science and Technology



FONDAZIONE IRCCS
ISTITUTO NAZIONALE
DEI TUMORI

Sistema Sanitario Regione Lombardia



Pain in Palliative Care



Patient summary of new
European Guidelines on
cancer pain management

www.epcrc.org

"Pain is whatever the experiencing person says it is, existing whenever he says it does."

Margo McCaffery

What is pain?

Pain is a frequent symptom in cancer patients. It is a subjective sensation and is characterized by an unpleasant physical and emotional experience. Pain is a common human experience and everybody may have pain when ill or injured. Most of these pains resolve promptly once the painful stimulus is removed and the body has healed, but sometimes, if the disease is long lasting or does not resolve completely, pain persists, becoming chronic. Chronic pain should be viewed as a disease state and should be treated accordingly.

Pain assessment

Not all pains are the same, therefore a thorough and precise assessment of the different pain characteristics is crucial for starting appropriate treatment of the pain and its cause. Your doctors and nurses should always carefully evaluate your pains and examine you. Sometimes they will ask you to score your pain intensity and to describe its quality using simple question and number tools. These pain intensity scores are very important to help your doctors and nurses to give you the best treatment.

Pain therapy

The World Health Organization (WHO) recommends a pain ladder to classify drugs for cancer pain management.

The new European guidelines can be viewed as an update of the WHO pain ladder, based on the most recent knowledge about painkillers.

I step: Mild pain

Paracetamol or a non steroidal anti-inflammatory drug (NSAID), such as ibuprofen or naproxen, are preferred for patients with mild pain.

II step: Mild to moderate pain

A weak opioid (such as codeine or tramadol) with or without the addition of paracetamol or NSAIDs, is preferred for patients with mild to moderate pain.

III step: Moderate to severe pain

Morphine, hydromorphone, oxycodone, fentanyl and buprenorphine are appropriate opioid drugs for the management of moderate to severe cancer pain, and can be taken by mouth or through a skin patch.