

Cancer Pain Management

It is not uncommon for patients to feel pain. A cancer tumor can cause pain. Sometimes treatments result in pain. However, pain can be managed to provide a level of comfort that allows daily activities. Tell your doctor or nurse right away if you are feeling pain. Getting help for your pain early makes pain treatment more effective.

Pain that is not managed may delay your cancer treatment, affect your response to treatments or cause you to seek emergency care and be admitted to the hospital. When pain is not treated properly, it may interfere with:

- Daily activities and functioning
- Sleep
- Appetite
- Enjoying friends, family, and other pleasures in your life
- Response to treatment

Causes of Cancer Pain

There are many causes of cancer pain. Most cancer pain occurs when a tumor presses on bone, nerves or body organs. Cancer treatment can also cause pain.

You may also have pain that has nothing to do with cancer. Like everyone else, you can get headaches, muscle strains and other aches and pains. Other conditions, such as arthritis, can also cause pain. Pain from these other conditions can be treated along with cancer pain. Ask your doctor or nurse what you can take for these everyday aches and pains.

Treating Cancer Pain

There are many different medicines and methods available to manage your cancer pain. You can buy effective pain relievers without a doctor's prescription. These pain relievers are called nonprescription or over-the-counter medicine. For other pain medicines, a prescription from your doctor is necessary.

Non-drug treatments such as relaxation techniques can also be helpful. These techniques may give you some relief. Use these methods by themselves or with your medicine.

- Biofeedback
- Breathing and relaxation exercises
- Prayer or meditation
- Imagery
- Massage, pressure or vibration
- Acupuncture
- Distraction

- Rest
- Heating pads and hot or cold packs
- Transcutaneous electrical nerve stimulation (TENS)

Types of Pain Medicine

Many medicines, called analgesics, are used to treat cancer pain. Your doctor may give you one or more of these to take. Pain medicines work differently for different people. In the beginning, you may need to adjust the amount and type of medicine. Work with your doctor to find an effective combination.

The following list describes the different types of medicines.

Non-opioids for mild to moderate pain

Examples are acetaminophen and nonsteroidal anti-inflammatory drugs (NSAIDs), such as aspirin and ibuprofen. You may buy many of these over-the-counter (without a prescription). Others may need a prescription.

- **Benefits:** Manages mild to moderate pain. Some can be bought without a prescription.
- **Risks:** Some of these medicines can cause stomach upset. They can also cause bleeding in the stomach, slow blood clotting, and kidney problems. Acetaminophen does not cause these side effects, but high doses can hurt the liver.

Opioids for moderate to severe pain

Examples are morphine, hydromorphone, oxycodone and codeine. You need a prescription for these. Non-opioids may be used with opioids for moderate to severe pain.

- **Benefits:** These medicines manage moderate to severe pain and do not cause bleeding.
- **Risks:** May cause constipation, sleepiness, nausea and vomiting. Opioids sometime cause problems with urination or itching. They may also slow breathing, especially when they are first given, but this is unusual in people who take opioids on a regular basis for pain.

Antidepressants for tingling and burning pain

Examples are amitriptyline, imipramine, doxepin and duloxetine. Taking an antidepressant does not mean that you are depressed or have a mental illness. You need a prescription for these.

- **Benefits:** Antidepressants help to manage tingling or burning pain from damaged nerves. They also may improve sleep.
- **Risks:** These medicines may cause dry mouth, sleepiness, and constipation. Some cause dizziness and lightheadedness when a person stands up suddenly.

Anti-epileptic for tingling and burning pain

Examples are gabapentin, pregabalin and other medicines. Taking an anti-epileptic does not mean that you are going to have seizures. You need a prescription for these.

- **Benefits:** Help to manage tingling or burning from nerve injury.
- **Risks:** May hurt the liver and lower the number of red and white cells in the blood. It is important to have regular blood tests to check for these effects.

Steroids for pain caused by swelling

Examples are prednisone and dexamethasone. You need a prescription for these.

- **Benefits:** Help relieve bone pain, pain caused by spinal cord and brain tumors, and pain caused by inflammation. Steroids also increase appetite.
- **Risks:** May cause fluid to build up in the body. May also cause bleeding and irritation to the stomach. Confusion is a problem for some patients when they take steroids.

When to Take Pain Medicine

Taking your medicine on a regular schedule is called “around-the-clock” (ATC). Having a set time to take your medicine helps to keep pain under control. Do not skip a dose or wait for the pain to get worse. This method builds up a steady level of pain medicine in the body, which helps prevent a pain crisis.

Even when you take your medicines as scheduled, you may still have breakthrough or “as needed” or “prn” pain. You will use another medicine to address spikes in pain not managed by long acting medicine. PRN medicines usually last for 2 to 4 hours. Taking more than 4 doses of a breakthrough medicine a day is often a sign that the ATC medicine needs to be adjusted.

Ask your doctor or nurse if some activities increase your pain, such as riding in a car. You may need to take extra doses of pain medicine before these activities. The goal is to prevent the pain. Once you feel the pain, it is more difficult to control.

Side Effects of Pain Medicines

All medicines can have side effects, but not all people get them. Some people have different side effects than others. Most side effects happen in the first few hours of treatment and gradually go away. Some of the most common side effects of pain medicines are:

- Constipation (not being able to have a bowel movement)
- Nausea and vomiting
- Sleepiness
- Slowed breathing

Most side effects will improve after the first 3-5 days of starting or adjusting a pain medicine. Constipation may remain a problem so it is important to follow instructions on treating and preventing constipation while taking pain medicines.

More serious side effects of pain medicines are rare and usually happen in the first few hours of treatment. More serious side effects include trouble breathing, dizziness, and rashes. If you have any of these side effects, you should call your doctor or nurse right away.

When Medicine and Non-drug Treatments Are Not Enough

Cancer pain is usually treated with medicine. Radiation treatment, surgery and other treatments can be used with medicine to give even more pain relief. Talk to your doctor or nurse about other

treatments. There are many ways to decrease pain without medicine too. Sometimes people need more help to relieve pain. If so, your doctor may suggest:

- **Radiation therapy.** This reduces pain by shrinking a tumor. A single dose of radiation may be effective for some people.
- **Nerve blocks/Implanted Pain Pump.** Certain nerve blocks, temporary or permanent, may help relieve pain. Implanted pain pumps can be of great benefit in some instances.
- **Neurosurgery.** Pain nerves (usually in the spinal cord) are cut to relieve the pain.
- **Surgery.** When a tumor is pressing on nerves or other body parts, surgery to remove all or part of the tumor can relieve pain.

Common Concerns

You may have concerns or fears about pain management. Let us know what you are thinking so we can provide explanations or make adjustments to your treatment plan. Listed below are some common patient concerns and the facts about them.

Concern: I will become "hooked on" or "addicted to" pain medicine.

Fact: It is rare to become addicted to pain medicine when taken as prescribed for cancer pain. Your doctor will monitor your dose, usage and risk for addiction frequently. Addiction is a treatable disorder and should not stop you from taking medicine to manage pain.

Concern: If I take too much medicine, it will stop working.

Fact: The medicine will not stop working, but your body may get used to it. This is called tolerance. The amount of medicine can be adjusted or other medicines can be added.

Concern: The side effects will be worse than the benefits of pain relief.

Fact: Most of the common side effects of pain medicines, including constipation, can be managed.

Concern: I should only take medicine or other treatments when I actually have pain.

Fact: Take your long acting pain medicine regularly as you have been instructed. Take it even when you are not feeling pain. You can then use short acting pain medicine as prescribed for breakthrough pain. Other treatments such as relaxation, breathing exercises, and hot and cold packs can also be used as often as you want to.

Concern: If I complain too much, I am not being a good patient.

Fact: Managing your pain is an important part of your care. Tell your doctors and nurses if you have pain, if your pain is getting worse. They can help you manage your pain.

Calling with a Pain Problem

It is helpful when you call with a pain problem to be able to answer the following questions. Use the pain management log that is included at the end of this document to track your information.

1. Your pain levels, on a scale of 0 to 10, during the previous day (highest, lowest and typical).

2. Any symptoms you are having and at what level (on a 0 to 10 scale, with zero being no pain and 10 being the worst pain you have ever had).
3. Are you taking your around the clock medicine as prescribed? If not, how often are you taking it?
4. Number of breakthrough or “prn” doses you are taking per day.
5. What makes your pain worse? What makes it better?
6. When was your last bowel movement? Are you following a bowel management program?

Pain Management Log

You or your caregiver may find it helpful to keep a record of pain levels and medicines. Use this log to track when pain is not well managed or before a visit to the clinic.

My personal pain goal is level _____.

Date / Time	Pain Level ☺ 0-10 ☹	Location of Pain	Medicine and Dose	Other Treatments	Comments
(Example) May 6, 8 am	6	Back of head, neck	Morphine 5mg tablet	Tried massage	Did not sleep well.