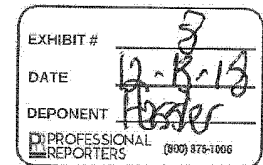
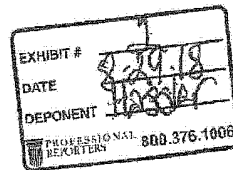
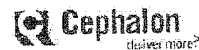


# MAKING PAIN TALK PAINLESS



A guide to help you talk  
with your doctor  
about pain management.

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Talking with your doctor about pain can be confusing. You may hear words you know, and some you don't. This guide will give you definitions to the words doctors and nurses use when talking about pain. It is important to learn these words. You can take this guide with you and read it at home. Once you know these words you will feel more comfortable talking with your doctor. Knowing these words will make you a better partner in the management of your pain.

This guide is divided into 3 sections:

Section 1: Different kinds of pain

Section 2: Different kinds of pain medicine

Section 3: Side effects related to pain medicine

### Section 1: Different kinds of pain

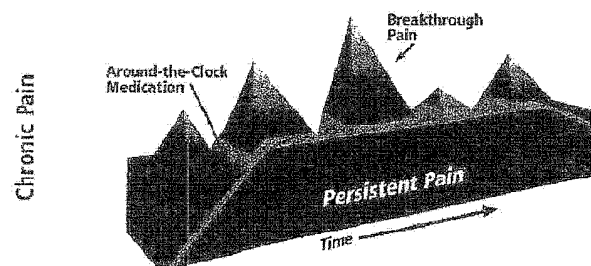
There are several kinds of pain. Different pains are caused by different things. It is important to know these differences. Your doctor will give you the medicine best suited for the pain you are having.

**Acute pain:** Pain that lasts for a short time, a few days to a few weeks. Acute pain may be caused by injury or surgery.

**Chronic pain:** Pain that lasts for more than 3 months. There are 2 kinds of chronic pain: breakthrough pain and persistent pain. You may suffer from one or both of these chronic pains.<sup>1,2</sup>

**Persistent pain:** This kind of pain lasts all day long. It does not spike like breakthrough pain. Your doctor might also call this pain "background pain" or "baseline pain."

**Breakthrough pain:** An intense flare or spike of pain that rises above your persistent pain (see below). Breakthrough pain occurs only with controlled persistent pain. There are specific medicines to control breakthrough pain.



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## Section 2: Different kinds of pain medicine

If you are in pain, your doctor will often give you medicine. You will be given medicine based on the kind of pain you are having. So, first, your doctor will try to figure out what kind of pain you are having. Your doctor will also try to find out what is causing your pain.

It is also important to know that different medicines are taken in different ways. The different ways to take medicine are called delivery systems. Examples of delivery systems are pills and shots, but there are other ways too.

**Analgesic:** Any medicine used to relieve pain.

**Around-the-clock:** Medicine that works for 8 hours or more. This will also be called "long-acting" or "sustained-release" medicine. Around-the-clock pain medicine is used for persistent pain.

**Intravenous (IV):** A delivery system whereby a needle is placed in a vein and secured. The medicine moves through a tube that lets the medicine enter right into your bloodstream.

**Nonsteroidal anti-inflammatory drugs:** Commonly called NSAIDs. These drugs treat mild pains and swelling. Most NSAIDs are over-the-counter pain relievers like Advil™ (ibuprofen).

**Opioids:** These medicines are part of a class of strong painkillers. Opioids do not take the pain away, they interfere with and stop pain messages from being sent to the brain to change the feeling of pain. Opioids require a prescription from your doctor. Examples of opioids are morphine, fentanyl, oxycodone, and codeine.

**Oral transmucosal:** Another kind of delivery system. This kind of medicine is absorbed through the lining inside your mouth, between your cheek and gum.

**Rapid-onset:** This kind of medicine starts working in 15 minutes or less.

**Transdermal:** This is a delivery system for certain medicines. Medicine is absorbed into the body through a patch placed on the skin.

## Section 3: Side effects related to pain medicine

When you take any kind of medicine there is a chance you will get side effects. Side effects are unwanted ways your body may respond to medicine. It is important to be aware that different medicines may have different side effects. Short-term side effects can happen within about the first 10 days of being on a medicine. Long-term side effects can happen after being on a medicine for more than 10 days.

If you feel or think anything out of the ordinary after taking a medicine you should tell your doctor or nurse right away. The number of side effects you have and how often you have them may be different for each medicine. Some side effects are easy to treat. Some side effects are more serious, even harmful, and you may need to stop taking the medicine because of them. It is important to discuss side effects with your doctor.

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### Section 3: Side effects related to pain medicine (cont)

The following are common short-term side effects:

**Constipation:** Difficulty with bowel movements because of hardened stools  
(NOTE: May persist over time)

**Decreased appetite:** Not wanting to eat

**Diarrhea:** Loose stools

**Dizziness:** Feeling light-headed

**Drowsiness:** Feeling tired

**Euphoria:** An extreme feeling of well-being and happiness

**Headache:** Pain in the head

**Nausea:** Upset stomach

**Rash:** Spots or patches of itchy, irritated skin

**Respiratory depression:** Slow breathing, unable to take deep breaths

**Vomiting:** Emptying the contents of the stomach through the mouth

The following are possible long-term side effects or conditions:

**Addiction:** Characterized by 1 or more of the following: impaired control over drug use, compulsive use, continued use despite harm, and craving of a medicine. Addiction rarely occurs when you take medicine under your doctor's supervision.<sup>3,4</sup>

**Physical dependence:** When your body has come to depend on having the drug in your system. If you suddenly stopped you would feel sick. This is called withdrawal syndrome. If opioids are used for a long period of time, it is expected that you will become physically dependent on your medicine.

**Pseudo-addiction:** Medicine-seeking behavior caused by not taking enough pain medicine and can be mistaken for addiction. It is NOT addiction. If you feel you are not taking enough medicine to relieve your pain, talk with your doctor.

**Pseudo-tolerance:** Similar to tolerance, this is when your body needs more medicine to continue feeling pain relief. More medicine is needed because the original cause of pain has progressed, a new cause is present, or because of increased activity and not because your body has adjusted to the medicine.

**Tolerance:** When your body gets used to the medicine and its effects. A stronger amount of medicine is needed to maintain pain relief. Tolerance is NOT addiction.

You should always talk with your doctor or nurse if you have any questions. Now that you have read this guide you have a starting point in understanding your pain management and how to begin talking with your doctor about it.

References: 1. American Cancer Society. Breakthrough cancer pain: questions and answers. Available at: [http://www.cancer.org/docroot/MF/content/MF\\_7\\_2x\\_Breakthrough\\_Cancer\\_Pain\\_Questions\\_and\\_Answers.asp?htarea=MF&viewmode=print&](http://www.cancer.org/docroot/MF/content/MF_7_2x_Breakthrough_Cancer_Pain_Questions_and_Answers.asp?htarea=MF&viewmode=print&). Accessed November 7, 2005. 2. National Pharmaceutical Council. Pain: current understanding of assessment, management, and treatments. Available at: [http://www.jpah.org/news+room/health+care+issues/pain\\_mono\\_nrc.pdf](http://www.jpah.org/news+room/health+care+issues/pain_mono_nrc.pdf). Accessed October 27, 2005. 3. Tolerance, physical dependence and addiction: definitions, clinical relevance and misconceptions. Available at: <http://www.whocancpain.wisc.edu>. Accessed February 28, 2005. 4. American Academy of Pain Medicine, American Pain Society, and American Society of Addiction Medicine. Definitions related to the use of opioids for the treatment of pain [consensus document, approved 2001]. Available at: [www.painmed.org/productpub/statements/pds/definition.pdf](http://www.painmed.org/productpub/statements/pds/definition.pdf). Accessed August 4, 2005.

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