Reading This Could Help Ease Your Pain

Pain Action Guide

American Pain Foundation



PLAINTIFFS TRIAL EXHIBIT

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How Statement is the PAN Problem

Americans suffer from chronic pain, and each year another 25 million experience acute pain from injuries or surgery. Although most pain can be greatly eased with proper pain management, most goes untreated, is undertreated, or is improperly treated. No one should have to suffer needlessly when the knowledge and ability to manage most pain is available.

Once your pain is under control, you'll be able to sleep better, focus on work, enjoy relationships with family and friends, and take part in social activities. Also, if your pain habeen caused by an injury or surgery your recovery may be fastern

Finding good pain care and taking control of your pain can be hard work. But the results are rewarding. Learn all you can about your pain and possible treatments. Work in partnership with your healthcare provider.

New Pain Care Standards for Healthcare Facilities

Most hospitals, nursing homes, and other healthcare facilities are now required to assess and treat pain. They are also required to inform patients about their right to effective pain care. These new pain management standards were set by Doint Commission on Accreditation of Healthcare Organizations (JCAHO).

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KNOW THE FACTS!

Your pain may or may not be signaling a disease or infection. Be sure to get a correct diagnosis.

Pain is not something you "just have to live with." Treatments are available to lessen most pain. Left untreated, pain can worsen other health problems, slow recovery, and interfere with healing. Get help right away. Don't let anyone tell you your pain is "just in your head."

Not all healthcare providers know how to treat pain. If your healthcare provider is unable to treat your pain effectively, ask him or her to refer you to a special st. You may need to consider changing providers.

Pain medications rarely cause addiction. Morphine and similar pain medications, called opioids, can be highly effective for certain conditions. Unless you have a history of substance abuse, there is little risk of addiction when these medications are properly prescribed by a doctor and taken as directed. Physical dependence—which is not addiction—may occur and cause withdrawal symptoms if you stop taking these medications suddenly. You'll need to go off your medications gradually.

Most side effects from opioid pain medications can be managed. Nausea, drowsiness, itching, and most other side effects caused by morphine and similar opioid medications usually last only a few days. Constipation, the side effect that is most difficult to manage, can usually be relieved with laxatives, adequate fluid intake, and attention to diet.

If you act quickly when pain starts, you can often prevent it from getting worse. Take your medications when you first begin to experience pain. If your pail does get worse, talk with your healthcare provider. Your provider may safely prescribe higher doses or change the prescription. Non-drug therapies, such as relaxation training, can also help give you relief.



PAIN CARE BILL OF RIGHTS

As a Person with Pain, You Have The Right to:

- Have your report of pain taken seriously and to be treated with dignity and respect by doctors, nurses, pharmacists, and other healthcare professionals
- Have your pain thoroughly assessed and promptly treated.
- Be informed by your healthcare provider about what may be causing your pain, possible treatments, and the benefits, risks, and costs of each.
- Participate actively in decisions about how to manage your pain.
- Have your pain reassessed regularly and your treatment adjusted if your pain has not been eased.
- Be referred to a pain specialist if your pain persists.
- Get clear and prompt answers to your questions, take time to make decisions, and refuse a particular type of treatment if you choose.

Ithough not always required by law, these are the rights you should expect for your pain care.

How Do I Talk with My Healthcare Provider About My Pain?

Speak up! Tell your healthcare provider that you're in pain. It's not a sign of weakness to talk about your pain.

Tell your healthcare provider where it hurts. Do you have pain in one place or several places? Does the pain seem to move around?

Describe how much your pain hurts. Use a scale from 0 to 10: zero means no pain at all and 10 means the worst pain you can imagine. Explain when your pains the highest, lowest, and how it is right now.

Describe what makes your pain better or worse. Is the pain always there? Does it go away? Does it get worse when you move in certain ways? Do other things make it better or worse?

Describe what your pain feels like. Use specific words like sharp, stabbing, dull, aching, burning, shock like, tingling, throbbing, deep, or pressing.

Explain how the pain affects your daily life. Can you sleep? Work? Exercise? Participate in social activities? Concentrate? How does it affect your mood?

Tell your healthcare provider about past treatments for pain. Have you taken prescription medication or had surgery? Tried massage? Applied heat or cold? Exercised? Taken over the counter medications or vitamin supplements? Explain.

Write down your questions for the doctor or noise before an appointment. Take notes at your visit. Ifpossible, bring along a family member or friend for support.

How Can I Get the Best Results Possible?

Ask questions, and speak up if treatment isn'tworking: Follow your pain management plan, ask questions, and speak up if you're not getting relief. Sometimes the plan needs to be changed. If necessary, seek other help. Be persistent.

Set goals. With your healthcare provider, set realistic goals for things you most want to do, such as sleeping, working, exercising, or enjoying sexual relations. Begin with the easiest goals first.

work with your healthcare provider to develop a pain management plan. This might include a list of medications, when to take them, and possible side effects. It may include therapies other than medication, such as meditation. Make sure you understand the plan and carry it out fully. If you don't, you are less likely to get relief.

Keep a pain diary. Write about your level of pain at different times, how you're feeling, and what activities you can and cannot do. Keep a record of medications you're taking or any non-drug treatments. Bring the diary to your doctor visits.

Ask your healthcare provider about non-drug, nonsurgical treatments. These could include relaxation therapy, exercise, massage, acupuncture, application of cold or heat, behavioral therapy, and other techniques.

Ask your healthcare provider about ways to relax and cope with pain. Your pain may feel worse if you stressed, depressed, or anxious.

If you have questions or concerns, speak up. If you're worried about medications or other treatments, ask your healthcare provider. You have a right to know

how and why treatments work. The more you under stand, the better you'll be able to participate in your plan.

If you're having surgery, ask your healthcare provider for a complete pain management plan beforehand. Don't wait until after surgery to ask about your pain care.

If you're a patient in a hospital or other facility and you're in pain, speak up. Ask a healthcare provider for help. If you don't get help right away, ask again, if you still don't get nelp speak to a social worker or patient advocate. As of January 1, 2001, most hospitals and healthcare facilities are required to assess and treat your pain.

Pace yourself. Once you experience some degrees of control over your pain, don't overdo it. Your body may be out of condition. Take time to gradually build up to normal activity.

If you re not satisfied with your pain care, don't give up. Does your healthcare provider listen to you? is he or she able to essess and near your pain? If after a reasonable time the answer is "no," ask for a referral to a pain specialist, or find another healthcare provider.

How Should My Pain Be Treated?

First, understand that your pain should be treated, Left, untreated, pain can be harmful to your body. Pain freatments vary for different conditions. Ask your healthcase provider to tell you about treatment options that can help manage the pain that comes with your particular condition, in addition, first out shout way reduce sitess and cope effectively with your pain.

Most often, people with moderate to severe chronic pain (pain that passess over time) get the very best results with a combination of therapies that address the physical, functional, emotional, and spiritual aspects of pain.

Pain Medications: Medications, called analgesics, are valuable tools for reducing pain. Pain medications work best if taken before the pain becomes severe. You should take these medications when you begin to feel uncomfortable. Once pain becomes severe, it takes more time and more medication to bring it under control.

All medications, both over-the-counter and prescription, can have side effects. That's why it's important to take medications as directed and let your healthcare provider know about all of the medications you are taking (see relelines below).

Acetaminophen is a basic pain reliever that can be bought over-the-counter. Acetaminophen is often effective in managing mild pain. When taken as directed it is usually safe. If taken for an extended period, your healthcare provider should be aware and may want to monitor you for stomach, liver, and/or kidney problems. Acetaminophen comes as tablets and rectal suppositories.

Nonsteroidal anti-inflammatory drugs (NSAIDs) are pain relievers that are available over-the-counter (such as aspirin, ibuprofen, and naproxen sodium) and by prescription. NSAIDs are stronger than aceta minophen and are often used to treat mild to moderate pain. Cox-II inhibitors (such as rofecoxib and celecoxib) are new forms of NSAIDs. These drugs may be easier on the stomach and cause less bleeding problems than standard NSAIDs. However, they may not be safe for some people with heart disease or those allergic to sulfa. Most NSAIDs are available in pill form

drugs above are associated with liver damage, espeusity when used with alcohol or taken over a long period. NSAIDs can affect the kidneys and promote bleeding. They also have a "ceiling effect"— after the maximum dose is reached, there is no additional pain relief.

Opioids are strong medications used to relieve moderate to severe pain. Available only by prescription, opioids come in a variety of dosing forms and are sometimes combined with other substances such as aspirin and acetaminophen. Some opioids are given in pill form. Medications such as morphine and fentanyl can also be given through a transdermal skin patch (fentanyl only), injections into the veins or tissue, or under the skin into the muscle. Opioids can also be given under the tongue, through rectal suppositories, or in some cases, injected into the epidural or spinal space. Short-acting oral opioids, such as Oxycodone and hydromorphone, provide 4 to 6 hours of pain relief and are often used for breakthrough pain-short episodes in which pain increases dramatically: Long acting opioids usually last longer (8 hours to 3 days); and are used for moderate to severe pain states, such as lower back pain, osteoarthritis, and cancer.

More information on opioids can be found on the APF website: www.painfoundation.org

OTHER PAIN MEdications: Some medications that were developed to treat other conditions (such as anti-depressants, anti-inflammatory steroids, and anticonvulsants) can be helpful for treating pain. They are often given in combination with other analgesics. Discuss any questions you have about these drugs with your health-care provider and your pharmacist.

Topical medicines (applied to skin), like creams that contain anesthetics (numbing medicine) or capsaicin (made from hot peppers), may relieve pain on the surface level.

Non-invasive, Non-drug Therapies There are many non-drug therapies for relieving pain. They can be used alone or in combination with drug therapies:

Thermal treatments, such as applying heat (heating pad) and/or cold (ice pack), can reduce pain by allowing "non-pain" sensations to overload the nervous system.

Professional therapeutic massage is a method of manipulating the soft tissues of the body to relieve pain, release tension, and restore function. Often, balms or lotions are used with massage to increase relief of pain that is caused by tension, spasms, or painful areas called "trigger points."

Physical therapy, which can help improve function and quality of life, often includes: manual therapy techniques, exercises to improve strength and balance; use of physical agents such as ultrasound or electrical stimulation; and functional training.

Chiropractic is a system of adjusting segments of the ne to remove nerve interference. Chiropractors may also use other therapies, such as lifestyle and nutrition counseling.

Psychological counseling/cognitive therapy offers people powerful skills to help them manage their pain and stress.

Mind/body techniques are based on the idea that the mind and body work together as a unit. Mind/body techniques can relieve pain by reducing stress (which helps the immune system). Mind/body techniques include biofeedback, hypnosis, yoga, guided imagery, prayer and meditation, and music and humor therapy. These therapies help disengage consciousness.

Acupuncture is one of the oldest therapies known to mankind, and involves the insertion of very fine metal needles into the skin at specially designated points of the body. Acupuncture is thought to work by altering the body's energy flow and allowing the body to regain its balance and heal itself.

myASIVE PAIN THERAPIES: These are methods recommended for chronic or combined pain problems. Healthcare providers with special training in pain management can evaluate whether these methods could

improve your pain relief and give you information about what you can expect.

Analgesia catheters and infusion pumps deliver drugs such as oploids, anesthetics (numbing agents), and muscle relaxants. Catheters are placed in a variety of locations of the body. Sometimes they are used for a short period of time (for acute pain after surgery), or they can be surgically implanted for complex pain (cancer pain or nerve pain). An analgesia pump may be connected to the catheter and worn outside the body (short-term) or surgically placed inside the body (long-term). Special training is required for pain physicians and nurses offering these therapies.

Injection therapies may be used for pain located in a specific area of the body. Injecting medication to numb and stop inflammation may reduce the number of pain signals. These "nerve blocks" may give short or long: term relief, depending on the pain problem and your unique response. A physician requires special training to perform these injections.

Chemical, thermal, or surgical ablation may be used for some complex nerve pain problems. These methods destroy nerves that sense pain and other feelings (such as touch or pressure) without involving nerves used for movement and strength. Strong chemicals like phenol or alcohol may be used. Extreme temperatures from freezing (called cryoanalgesia) or heat (radiofrequency) may be recommended. Surgery may be used to either permanently cut the nerve area or remove the suspected cause of pain (spinal disc, tumor, etc.). For some people, surgery may provide complete and permanent relief, while for others the relief may be temporary or partial.

Spinal cord stimulators (SCS) or dorsal column stimulators (DCS) may be inserted for some special nerve pain problems. An electrode (metal wire) is placed around the spinal nerves that are receiving pain

messages. A small transmitter is programmed to send signals that block pain messages before they enter the spinal cord (where pain messages go before traveling to the brain for recognition). This transmitter can be worn on your clothing. Physicians who insert and manage this therapy require special training.

Radiation may be recommended if pain is caused by a tumor. This therapy helps to shrink the tumor size that may be pressing on nerves. Special radiation therapies may also be used to lessen bone pain.

Guidelines for Taking Medications

your healthcare provider about all the medications you are taking—both prescription and over-the-counter. Include vitamins and herbal supplements. Medications and herbs can interact with each other and cause side effects or complications. In some cases, some combinations of medications can either reduce or increase the effects of other needed medications. For more information, see the National Council on Patient Information and Education (NCPIE) website at www.medbewise.org.

Talk to your healthcare provider about any food or medication allergies you may have. This information can help determine your treatment.

Take all medications as directed. Even common, over-the-counter medications can have side effects—particularly if not taken as directed.

Talk to your pharmacist about your medications and how different foods might interfere with how work.

Caution: alcohol, in combination with many pain medications, can be very dangerous. If you drink, even socially, let your healthcare provider know.

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Where Can I Find Help?

Start at APF: www.painfoundation.org, toll-free 888-615-PAIN.

If you want to find a pain specialist:

- Ask your healthcare provider for a referral to a pain specialist or pain clinic.
- · Ask family, friends, and co-workers who have had pain.
- . Contact the referral service of the largest hospital in your area.
- · Call your state and county medical societies.
- If you are in a managed care program, call your representative and get the list of approved pain specialists.
- · Your local hospice can often suggest pain specialists.

Additional Resources

- American Alliance of Cancer Pain Initiatives. www.aacpr.wisc.edu 608-265-4013
- American Academy of Pain Medicine www.painmed.org
 847-375-473
- American Academy of www.aapanmanage.org
 Pain Management 209-533-9744

- 847.3/5-4/15
 Cancer Care www.cancercare.org.
 800.813-4673
- National Hospice and Market Mark
- Palliative Care Organization 703-837-1500

 Pain.com www.pain.com

To Find Support

- APF's PainAid painfoundation org

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Your Support is Needed!

The American Pain Foundation, an independent, nonprofit 501(c)(3) organization, depends on unrestricted contributions and grants from individuals, foundations, and corporations. We would appreciate your support. Please send your tax-deductible donation to: American Pain Foundation, 201 N. Charles St., Suite 710, Baltimore, MD 21201-4111.

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Help us build the pain movement and support those with pain. It's free! Sign up to receive our newsletter, e-newsletter, legislative alerts, and more, Just complete and return this form.

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About the American Pain Foundation:

The American Pain Foundation is an independent, nonprofit organization serving people with pain through information advocacy, and support. Our mission is fo improve the quality of life for people with pain by raising public awareness, providing practical information, promoting research on pain, and advocating to remove partiers and increase access to effective pain management.

For more information, visit our website,
www.painfoundation.org. There you will find information
about the causes of pain, different treatment options, ways to
find trained specialists, peer support, and how to cope will
pain. Our website also links to over 200 carefully selected
websites on pain and related topics.

If you are unable to access the internet and need more information, please write to us at

American Pain Foundation 201 N. Charles St., Suite 710 Baltimore, MD 21201-4111

To order this guide or for more information, deave a message on our foll-free line at:

1-888-615-PAIN(7246)

Or send an email to info@painfoundation.org



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