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Multimodal Therapies to Manage Pain – More than Just Opioids

Treating chronic pain is a challenging task as there can be multiple contributing factors for pain. Opioid analgesic therapy is often used to treat chronic pain. While this mode of therapy can be effective or partially effective for many patients, opioids may lead to overuse, adverse effects, hospitalizations and deaths. To maximize pain management and minimize potential adverse effects of opioid use, a multidisciplinary, multimodal approach is optimal to improve function and make pain manageable. This is best achieved when physical, cognitive, and psychosocial and risk assessment is conducted to help develop an individualized, patient-centered multimodal treatment approach and minimize the risk for abuse and diversion.

The American Society for Pain Management Nursing®'s (ASPMN®) mission is to advance and promote optimal nursing care for people affected by pain. All nurses are pain management nurses, and nurses function at healthcare's front lines. Non-pharmacological therapy for managing pain includes rest, ice and/or heat, repositioning, topical over the counter medications (for example menthol, lidocaine, capsaicin, methyl salicylate patches), diverting attention away from pain (for examples: music therapy, reading, prayer, and meditation), acupuncture, simple relaxation techniques, yoga, aroma therapy, and trial of over the counter pain medications. Other options such as chiropractic manipulation and application TENS units can be effective.

Primary care providers can offer patients non-medicine options including physical therapy, acupuncture, massage, and home exercise programs as appropriate for building strength to avoid or minimize re-injuries. Primary care providers may also recommend and prescribe non-opioid medications including NSAID's, muscle relaxants, anti-seizure and certain antidepressant medications either alone or in conjunction with opioid analgesics. These pharmacological options also carry potential side effects that need to be monitored. Adding an anti-seizure, an anti-inflammatory, or antidepressant medication often reduces the need for higher doses of opioid medication. Lifestyle modifications are also helpful in managing pain including use of correct lifting techniques to prevent re-injury, ergonomic modifications, smoking cessation, weight loss, psycho-social stressors and cognitive behavioral therapy and biofeedback.

Interventional treatment options can also play a key role in providing pain relief. These options include: epidural steroid injections for radicular pain, medial branch blocks and radiofrequency ablation for axial back pain and chronic knee joint pain (where surgery is not an option or has

failed), sympathetic blocks for complex regional pain syndrome and phantom pain, joint steroid injections, celiac plexus blocks for neuropathic abdominal pain, spinal cord stimulators, and intrathecal pump therapy.

ASPMN® is committed to improving outcomes for patients with chronic pain using multimodal approaches best suited for each individual patient. Our primary goal is to help alleviate pain and suffering while improving patient function and quality of life.