



Pennsylvania Cancer Pain Initiative Newsletter

Winter 2001

Issue 30

Cancer Patients Have a Right to Pain Control

A MESSAGE FROM THE DIRECTOR *Annual Conference Announcement*

With the media coverage about the drug Oxy-Contin, the Joint Statement from 21 health organizations and the DEA regarding the abuse of prescription pain medication, and the U.S. Attorney General's memo to the DEA on assisted suicide, the 11th Annual Conference of the PCPI is titled ***Cancer Pain Therapy in a Changing World of Regulations***. As a collaborative effort of the PCPI in partnership with the American Cancer Society (ACS), Pennsylvania Division, this conference will be held on Friday, April 5, 2002 at the Harrisburg Marriott.

The keynote address, *Pain Management and Regulatory Barriers: How does PA stack up*, will be given by David E. Joranson, MSW, Director of the Pain and Policy Group, which is a World Health Organization's Collaborating Center for Policy and Communications in Cancer Care. An overview of addiction medicine with relevance to cancer pain management will be presented by an expert in addiction medicine. Topics for concurrent workshops include: equianalgesic dosing, end-of-life care training programs, neuropathic pain, pediatric pain,

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AMERICAN CANCER SOCIETY'S *Cancer Survivors Network*

Realizing no one understands cancer like the people who live with it everyday, the American Cancer Society has facilitated the Cancer Survivors Network, a community created by and for cancer survivors and caregivers. Now, survivors and caregivers can connect with a diverse group of survivors and caregivers nationwide who have experienced the cancer journey and know, first-hand, that cancer can be survived, and that side effects of treatment, including pain, can be managed. The Cancer Survivors Network is a first of its kind emotional support system that is free and is accessible 24 hours a day, seven days a week via telephone, 1-877-333-4673 (HOPE), and the internet, www.cancer.org.

Online participants can hear or read discussions from people with similar backgrounds, such as age, gender, race/ethnicity, cancer type and cancer status. Network users also can register to become member of the Cancer Survivors Network community, allowing them participation in moderated chats and Internet Web casts; create personal Internet hompages; explore suggested resources; and e-mail other registered members.

All information shared on the Cancer Survivors Network is confidential.

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AMERICAN CANCER SOCIETY'S *Commitment to Research on Pain Management*

The American Cancer Society Research Department has a long-standing commitment to relieving cancer pain. In 1992, two five-year, multi-disciplinary Special Institutional Grants of one million dollars each were awarded to encourage research in this area.

The American Cancer Society is currently supporting 12 research and health professional training grants pertaining to cancer pain. The total amount of the multi-year awards is \$4.74 million.

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Pennsylvania Cancer Pain Initiative in partnership with the American Cancer Society, Pennsylvania Division

Director's Message Continued

neurosurgical and anesthesia therapies, and an American Cancer Society training session for Easing Cancer Pain. The concluding lecture, *Integrative Medicine and Pain Management: Evidence-Based Approaches*, will feature Andrea Cheville, MD, Director of Cancer Rehabilitation at the University of Pennsylvania, Philadelphia.

The registration fee is \$75, and continuing professional education credit will be provided for physicians, nurses, pharmacists, social workers, and psychologists. For more information about registration, contact Penn State Continuing Education at 717-531-6483 or by e-mail, ContinuingEd@hmc.psu.edu.

Research on Pain Management Continued

Some of the areas under investigation are:

- The impact of severe pain on tumor growth and metastasis
- The study of new cellular pain receptors that could lead to better pain medications
- The use of palliative surgery to reduce pain in terminally ill patients
- Ways for patients to improve communication about pain through interaction with nurses
- The use of pre-surgery hypnosis to reduce post-surgical pain

Pain-Related Articles in the Journal of Law, Medicine, and Ethics

We recently received an email about an interesting volume of the Journal of Law, Medicine and Ethics, Volume 29, 2001. Articles include "The Girl Who Cried Pain: A Bias against Women in the Treatment of Pain", "Pain Management and Provider Liability: No More Excuses", and "Race, Ethnicity and Pain Treatment: Striving to Understand the Causes and Solutions of Disparities in Pain Treatment. They can be read at the following website: www.aslme.org/media/index.html.

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Ashcroft Issues Directive Against Oregon's Assisted Suicide Law

In a November 6th directive, U.S. Attorney General John Ashcroft blocked the State of Oregon's Death with Dignity (physician-assisted suicide) law. Ashcroft affirmed that under the federal law controlled substances may not be prescribed, dispensed, or administered to assist suicide. Since Oregon is the only State that has legalized physician-assisted suicide, Ashcroft's affirmation "makes no change in the current standards and practices of the DEA in any State other than Oregon". The State of Oregon is challenging Ashcroft's ruling, and a preliminary hearing is set for November 20th. Read Attorney General Ashcroft's memorandum on line at: http://www.painfoundation.org/page_policy_memo.asp

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Promoting Pain Relief and Preventing Abuse of Pain Medications: A Critical Balancing Act

As representatives of the health care community and law enforcement, we are working together to prevent abuse of prescription pain medications while ensuring that they remain available for patients in need.

Both healthcare professionals, and law enforcement and regulatory personnel, share a responsibility for ensuring that prescription pain medications are available to the patients who need them and for preventing these drugs from becoming a source of harm or abuse. We all must ensure that accurate information about both the legitimate use and the abuse of prescription pain medications is made available. The roles of both health professionals and law enforcement personnel in maintaining this essential balance between patient care and diversion prevention are critical.

Preventing drug abuse is an important societal goal, but there is consensus, by law enforcement agencies, health care practitioners, and patient advocates alike, that it should not hinder patients' ability to receive the care they need and deserve.

This consensus statement is necessary based on the following facts:

- ◆ Undertreatment of pain is a serious problem in the United States, including pain among patients with chronic conditions and those who are critically ill or near death. Effective pain management is an integral and important aspect of quality medical care, and pain should be treated aggressively.
- ◆ For many patients, opioid analgesics – when used as recommended by established pain management guidelines – are the most effective way to treat their pain, and often the only treatment option that provides significant relief.
- ◆ Because opioids are one of several types of controlled substances that have potential for abuse, they are carefully regulated by the Drug Enforcement Administration and other state agencies. For example, a physician must be licensed by State medical authorities and registered with the DEA before prescribing a controlled substance.
- ◆ In spite of regulatory controls, drug abusers obtain these and other prescription medications by diverting them from legitimate channels in several ways, including fraud, theft, forged prescriptions, and via unscrupulous health professionals.
- ◆ Drug abuse is a serious problem. Those who legally manufacture, distribute, prescribe and dispense controlled substances must be mindful of and have respect for their inherent abuse potential. Focusing only on the abuse potential of a drug, however, could erroneously lead to the conclusion that these medications should be avoided when medically indicated – generating a sense of fear rather than respect for their legitimate properties.
- ◆ Helping doctors, nurses, pharmacists, other healthcare professionals, law enforcement personnel and the general public become more aware of both the use and abuse of pain medications will enable all of us to make proper and wise decisions regarding the treatment of pain.

American Academy of Family Physicians

American Academy of Hospice and Palliative Medicine

American Academy of Pain Medicine

American Alliance of Cancer Pain Initiatives

American Cancer Society

American Medical Association

American Pain Foundation

American Pain Society

American Pharmaceutical Association

American Society of Anesthesiologists

American Society of Law, Medicine & Ethics

American Society of Pain Management Nurses

American Society of Regional Anesthesia and Pain Medicine

Community-State Partnerships to Improve End-of-Life Care

Drug Enforcement Administration

Last Acts

Midwest Bioethics Center

National Academy of Elder Law Attorneys

National Hospice and Palliative Care Organization

Oncology Nursing Society

Partnership for Caring, Inc.

University of Wisconsin Pain & Policy Studies Group

Calendar of Events

February 21-23, 2002

Title: Planning a Hospital-Based Palliative Care Program: CAPC Management Training Seminar

Location: Tampa, FL

Web: www.capcmssm.org

Contact: 212-241-9090

February 27- March 3, 2002

Title: American Academy of Pain Medicine

18th Annual Meeting with Review/Refresher course

Location: San Francisco, CA

Web: www.painmed.org

Contact: 847-375-4731

March 14-17, 2002

Title: 21st Annual Scientific Meeting of the American Pain Society

Location: Baltimore, MD

Web: www.ampainsoc.org/meeting/

Contact: 847-375-4715

April 5, 2002

Title: Cancer Pain Therapy in a Changing World of Regulations: 11th Annual Conference of the Pennsylvania Cancer Pain Initiative

Location: Harrisburg, PA

Web: www.papainrelief.org

Contact: 717-531-6483 or ContinuingEd@hmc.psu.edu

April 19-21, 2002

Title: Become an EPEC Trainer

Location: TBA

Web: www.epec.net

Contact: 877-524-EPEC, info@epec.net

April 23-30, 2002

Title: Program in Palliative Care Education and Practice

Location: Boston, MA

Web: www.hms.harvard.edu/cdi/pallcare

Contact: 617-724-9509