

## ***IT'S ABOUT PAIN***

### **SECOND OPINIONS FOR BETTER PAIN CONTROL**

Ten years ago, the state of Oregon required doctors to take courses in pain management that emphasized pain level as a vital sign, like blood pressure, temperature, heart rate, height, and weight.

Just a few years later, the pendulum shifted, and doctors and pharmacists were threatened with sanctions if they over prescribed. This led to major problems for patients, as they were dropped by their doctors, forcibly taken off their opioids, and/or intimidated by pharmacists. Chronic pain was equated with drug addiction. Patients were subtly and not subtly accused of being drug dealers, responsible for the nation's 100,000 opiate overdose deaths.

After much complaining from patients and physicians, the tide turned when some very high profile suicides occurred in Seattle. The Boards of Medicine, Pharmacy, Nursing, Osteopathy, Dentistry and Chiropractic jointly announced that it was unethical to deny opioid treatment for chronic pain or to taper patients off their medications against their will.

The pronouncement did call attention to the notion of consultations for patients with high doses or poor pain control. The cutoff is a morphine equivalent dose (MED) of 120 (120 mg of morphine, 120 mg of hydrocodone, 80 mg of oxycodone, 40 mg of methadone, and 30 mg of dilaudid. Tramadol and codeine have very low MEDs, even in high doses).

*Why?* The concern was that higher MED patients may have a higher risk of accidental overdose.

While we have not seen this happen, we do believe that consultation with a pain clinic is helpful because these clinicians can offer a variety of alternate treatments that can reduce or eliminate the need for pain medicine prescriptions.

Spinal cord stimulators are devices that interrupt the messages to the brain from the centers of pain.

Opioid pumps deliver small but effective doses of opioids into the spinal canal, resulting in occupying pain receptors like pills do, but with much less toxicity.

Ablations, epidurals, and trigger point injections can reduce or eliminate the pain at its source.

Additionally, second opinions can sometimes lead to modified doses with better pain control and/or fewer side effects.

Our favorite pain clinics are:

- Oregon Interventional Pain in Northwest Portland (NOT DOWNTOWN) with Dr. Stuart Rosenblum, MD.
- PeaceHealth Interventional Pain Clinic in Vancouver with Dr. Benjamin Platt, MD and Leanne Williams, ARNP. Leanne was a member of our clinical staff during her internship training and afterwards until a job opened up with Dr. Platt and his deceased partner, Dr. John Luckwitz, MD, closer to Leanne's family home.

***Bottom Line: If your MED (see above) is over 120, we will refer you for consultation.***