

POLICY FORUM

Treating Chronic Pain

Introduction

Perhaps nothing is as debilitating as chronic pain, yet pain remains difficult to understand and categorize. Defining chronic pain as a clinical condition implies that it fits into neat categories with defined boundaries, therapeutic approaches, and predictable outcomes, but rarely does the reality of chronic pain obey such neat categorization.

Physicians are sometimes thought to be insensitive to pain and suffering, and many do prefer the thrill of diagnosis and definitive treatment to the long-term challenge of managing a patient and his or her pain. To understand the misery of the patient experience, however, the clinical view of chronic pain must be replaced with a broader definition of pain—one that acknowledges how unrelenting suffering saps the spirit at least as much as it haunts the body.

This issue of the NCMJ considers the troubling issue of chronic pain in order to better inform physicians of the full range of treatments that can offer relief. These articles remind us of the benefits and the increasing risks that are associated with the use of opioids. While effective for relieving pain, these potent drugs carry the threat of overdose both when used properly and, increasingly, when used improperly—whether due to theft, diversion, or overprescription. This issue also presents and discusses promising alternatives to opioids, including not only other pharmacologic options but also surgical and behavioral alternatives. Finally, there are several commentaries discussing the power of electronic records and how we can use searchable databases to identify overprescription by physicians and drug-seeking behavior by patients.

We have come a long way in understanding pain, and we now have an expanding array of options for more effective treatment and more thoughtful prevention of diversion and drug abuse, but we still need to go further. Once an opioid prescription has been written, patients can literally rest better, but prescribers cannot do the same; they must remain constantly vigilant in order to ensure that these drugs do no harm. Indeed, medical professionals and patients alike must be mutually accountable for the safe use of these drugs. Only then can we provide relief from the haunting specter of chronic pain while also protecting patients and the community from harm.

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