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Managing Cancer Pain: Breaking the Old Myths

o help ensure quality care for people with cancer pain, the Agency for Health Care Policy and Research, a part of the Public Health Service (PHS), has released a comprehensive clinical practice guideline for the management of cancer pain. The guideline is designed to help clinicians who work with oncology patients to understand the assessment and treatment of pain and associated symptoms.

The guideline, which was released to the public in early March, has been endorsed by 25 leading health and cancer organizations, including the American Cancer Society, the Oncology Nursing Society, and the National Coalition for Cancer Survivorship.

Many patients and physicians operate on the assumption that pain is an inevitable and untreatable consequence of cancer, one myth that panel members hope to destroy with the new guideline. Their assertion is that not all cancers cause pain, and

not all pain stems from cancer. Pain originates from a variety of sources, such as the cancer treatment, or by some unrelated problem, such as a headache. By identifying the source of the pain, the panel asserts, physicians can more readily find an adequate treatment.

The panel also attempts to break the myth that pain medication is addictive.

"The guidelines say treat pain early and aggressively, and they put to rest the idea that narcotics should be held back out of an unrealistic fear of addiction; in fact, addiction almost never occurs," said Dr. Philip R. Lee, PHS director and assistant secretary of health with the U.S. Department of Health and Human Services.

The strength of the guideline rests in its support of the ongoing assessment of pain throughout the disease continuum of diagnosis, treatment, rehabilitation, cure, or palliation, according to ACCC Board Member Margaret A. Riley,

M.N., R.N., C.N.A.A.

"The experience of pain changes over time," she said. "What has relieved or exacerbated pain in the past for a patient may be different today and in the future.

"Clinicians are partners with patients and families in managing pain and pain relief," she added. "By reassuring patients and families that in approximately 90 percent of patients cancer pain can be controlled, the anticipatory anxiety of pain associated with a diagnosis of cancer can be significantly reduced."

The guideline is detailed in several publications, the primary one being a 257-page book entitled Clinical Practice Guideline for the Management of Cancer Pain. There are also Quick Reference Guides for Clinicians and a patient brochure.

The free publications are available by calling the National Cancer Institute's Information Service at 800-4-CANCER. Or write to: Cancer Pain Guideline, P.O. Box 8547, Silver Spring, MD 20907.

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