



Acute Pain and Cancer Pain

A position statement from the American Academy of Pain Medicine

Many physicians who practice Pain Medicine have a special interest and expertise in acute pain or cancer pain.

Recent improvements in the methods of treating acute pain allow for the effective treatment of pain and lessen suffering. In addition, the length of hospital stay and the risk of post-operative complications associated with surgery are often lessened when acute pain is well controlled. Many patients with acute pain, such as children and adults with coexisting medical conditions, have special needs. Specialized technology (e.g., epidural catheter) is often required to relieve pain. In such instances, consultation with a suitably trained pain specialist is necessary to safely achieve optimal outcomes.

Cancer pain, like other forms of pain, is widely undertreated even though it is recognized to be common, particularly in advanced states of the disease. As is true for other types of pain, most cancer pain can be treated through simple, low-tech approaches. However, a substantial minority of patients with pain due to cancer do not respond adequately to simple approaches. These patients require coordination of drug and non-drug therapies or more complex and sophisticated medical regimens (such as using adjuvant drugs to enhance pain relief, reduce side effects of analgesics, or treat depression). More invasive techniques that are sometimes needed include nerve blocks, neurosurgical procedures, or implantation of drug delivery systems. When complex pain treatment measures exceed the capabilities of the primary practitioner or oncologist, consultation with an expert in Pain Medicine becomes necessary.

The same principles of using expert pain consultation and treatment that include medicines, technology, and non-drug measures such as relaxation or hypnosis also apply to non-malignant conditions that can cause severe pain. Applying these principles in an integrated, individualized manner can restore and maintain quality of life in patients with acute or cancer pain as well as patients with other painful conditions, including HIV/AIDS, diabetes with neuropathy, headache, and severe arthritis.

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