Role of the Nurse in Pain Management: Part 1

Every nurse should be able to assess and manage pain. This curriculum is intended to provide the basic level of pain education for nurses in primary care settings.

Presented through Project ECHO®
Jeannie Boyle, MSN RN
OBJECTIVES

• **Part I:** Upon completion of this ECHO RN module, the nurse will be able to:
  • Distinguish between different types of pain
  • Identify chronic pain mechanisms, assessment and care planning and nursing management
  • Recognize individuals at risk for under-treatment of their pain

• **Part II**
  • Use valid pain assessment tools that are appropriate to the needs of the individual patient in their community
  • Provide patients and family members with evidence-based information about chronic pain management
  • Demonstrate effective collaboration with the inter-professional team

  • Source: IASP, 2012
CONTENT OUTLINE

I. Part One:
   I. Introductions
   II. Multidimensional Nature of Pain
   III. Chronic Pain Assessment

II. Part Two:
   I. Measurement and Management of Chronic Pain
   II. Chronic pain conditions common to primary care

Part I

- Brief survey
- Intro to pain
- Multidimensional nature of pain
- Chronic pain nursing assessment
Survey:

• Annual cost of pain in US is ________________

True or False:

• Pain is always detectable by diagnostic testing
• Opiates are excellent medications for all types of pain
• I feel comfortable around pain patients
• No one has to live with pain
• Some people of certain national origin never have pain
• I know the difference between addictions, dependence and tolerance
INTRODUCTION

• Nurses play a critical role in effective pain management because they have frequent contact with patients in a variety of settings
  • (e.g., home, hospital, outpatient clinic, community)
NURSES ARE UNIQUELY PREPARED TO:

• Identify patients who have chronic pain
• Perform a comprehensive and holistic pain assessment
  • of the patient
  • the patient’s family
  • the patient’s community
• Initiate action to manage the pain
• Evaluate the effectiveness of pain management
• Educate
• Advocate
Patient is the Center
Multidimensional Nature of Pain

- Epidemiology
- Impact in the U.S.
- Definitions
Epidemiology of Chronic Pain

• Nearly 100 m adults c/o pain
• Cost burden including treatment / lost productivity = ~600 b/yr
• Headache, back pain and other musculoskeletal pain are main contributors

• Patients usually contact the primary care office first
• Primary care office often refers to E.D. or U.C.
Impact

• ~100 m adults with burden of care equal to $600 b/yr
  Costs for care
  Costs in lost productivity
BACKGROUND: Need for a Pain ECHO

• Unintentional Drug Overdose Death Rates is reaching a Public Health Crisis
• Opiates frequently involved in the overdose death (but not the only drug)
• Death Rates predominantly seen in adolescents and young adults
• Unintentional Opiate-related Death rates now EXCEED motor vehicle accident deaths in some states
Pain is defined based on

• Duration of the pain and on.....

• ......the mechanisms of the pain
Duration/Mechanism

• Acute

• Chronic or persistent

• Breakthrough (Malignant pain; pain associated w/ poor functional status; pain despite treatment)

Nociceptive pain = pain occurring as a normal function of nociception (touching hot stove)

• Neuropathic pain = Pain arising as a direct consequence of a lesion or disease affecting the somatosensory system that may be undetectable via diagnostic testing.
  - Peripheral
  - Central
Nerve Man

Note the variety of descriptors the patient will use

TAXONOMY

Neuropathic pain
Caused by a lesion or disease on the somatosensory (SM) nervous system
A clinical, not diagnostic, term

Central neuropathic
Caused by lesion or dz of central SM nerve system

Peripheral neuropathic
Caused by lesion or dz of peripheral SM nerve system

Neuropathy
Disturbance of function of a nerve

Not be confused with Neuritis- which is inflammatory process affecting nerves

IASP, 2014

http://www.theacpa.org/condition/neuropathic-pain
Multiple domains / dimensions

- Physiological
- Sensory
- Affective
- Cognitive
- Behavioral
- Social / cultural

Pain is not a respecter of race creed national origin
Welcome to Nerve Central Station

There are millions of nerves linked to one another throughout your body. These nerves make up your central nervous system. Think of it as a series of electrical wires or telephone lines connecting your brain and body, allowing them to communicate.

Nerves can become injured or damaged in a number of ways, such as an injury to the spine or from a medical illnesses like diabetes, shingles, a stroke, HIV infection, or cancer and its treatments.

*Nerve pain feels like...*

Many people with nerve pain often don’t describe this feeling as “painful.” Instead, they may describe it as being pricked with pins and needles or shocked by electricity. Often, nerve pain can be caused by something that is not painful, such as the light touch of bedsheets.

**Common symptoms include:**

- Numbness
- Burning
- Tingling
- A stabbing sensation
- Pins and needles
- Electric-shock pain

The symptoms mentioned above are often a sign of different conditions that cause injury to your nerves. By scrolling over “nerve man” you can learn about the different parts of the body where pain from these conditions manifest.

[GO TO SYMPTOMS] [GO TO CONDITIONS]
Physiological

http://www.painedu.org/tools/pathophysiology_pain.asp

• Transduction
• Transmission
• Modulation
• Perception
Sensory

• Location
• Quality

• Pattern – “starts in my big toe and travels up my leg to my shin”

• Relieving and exacerbating factors – “worse when I am trying to sleep”

• Intensity – “mild today, but really bad at night”
Affective

• Influence of emotions
• Consequences of pain and suffering
• Impact on mood, sleep socialization

Cognitive

• Personal beliefs
• Meanings attached to pain experience or disease
• Spiritual beliefs
• Cultural beliefs
Behavioral

- Response to stressors
  - Situational
  - Developmental
- Pain expression behaviors
- Pain control behaviors
- Usual behaviors prevented by pain
Social and community considerations

• Social and cultural variations conceptualizing pain, its meaning and its management
• Access
ASSESSMENT

• Nursing assessment of the chronic pain pt.
  • Physical
  • Psychological
  • Social
End of Part I - Quiz

1. Pain is defined by _________ and _______________.

2. Nursing pain assessment includes evaluating psychological and social considerations in addition to physiological factors.  T   F

3. People at risk for under-treatment of pain express pain differently than expected by the healthcare team.
Part II

• Measurement and Management of Chronic Pain
• Chronic pain conditions common to primary care
MEASUREMENT

• Intensity of pain
• Impact on function
• At risk assessment
  • Under-treatment
  • Aberrant behaviors
• Documentation
MANAGEMENT

• Establish goals of pain mgt. with pt. & family
• Identify barriers to effective pain mgt.
• Identify appropriate interventions
  • Pharmacological
  • Non pharmacological
  • Multimodal and interprofessional
• Educate & monitor pain relief, adverse effects, function
• Advocate for patient: Rights
CHRONIC PAIN CONDITIONS COMMON TO PRIMARY CARE

- Headache
- Back Pain
- Arthritis
- Neuropathic pain
- Emergency considerations
- Aberrant drug-related behaviors
- Withdrawal
- Overdose
References

• Nurse Practice Act
• ANA
• AAPM
• Project ECHO® Chronic Pain Modules