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Daniel Ianno
University of Vermont

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Broadening perspectives on the management of chronic pain: integrating effective alternative therapies into treatment

DANIEL IANNO

MAD RIVER FAMILY PRACTICE – DR. FRANCIS COOK

2/2016 – 3/2016

Opioid use in treatment of chronic pain & the underutilization of alternative therapies.

- ▶ Opiates can be effective at alleviating pain, however their use comes with the risks of tolerance, dependence, and diversion.
- ▶ Making a patient aware of alternative modes of therapy, effective at mitigating the burden of chronic pain, can help to reduce their perceived need of narcotics to attain pain relief.
- ▶ Complementary and alternative medicine have been described as (10):
 - ▶ “interventions neither taught widely in medical schools nor generally available in U.S. hospitals” (5)
 - ▶ “therapies that typically fall outside the Western biomedical model of disease, diagnosis, and treatment” (4)

Opioid use in treatment of chronic pain & the underutilization of alternative therapies.

- ▶ Alternative Treatment options are often underutilized in western medicine due to the lack of evidence based medicine which supports their efficacy.
- ▶ However, population-based assessments of alternative therapies may not be appropriate, as many alternative therapies understand healing only in the context of individuals. (10)
- ▶ There are some small scale studies that support the value of alternative therapies in the treatment of chronic pain.
 - ▶ Acupuncture
 - ▶ Cognitive Behavioral Therapy
 - ▶ Hypnosis
 - ▶ Craniosacral Therapy
 - ▶ Flotation-REST
 - ▶ Theta Binaural Beat Therapy

The cost of prescription opioid abuse is a great burden on society (1).

- ▶ US societal costs of prescription opioid abuse were estimated at \$55.7 billion in 2007.
 - ▶ Workplace costs accounted for \$25.6 billion (46%)
 - ▶ lost earnings from premature death (\$11.2 billion)
 - ▶ reduced compensation/lost employment (\$7.9 billion)
 - ▶ Health care costs accounted for \$25.0 billion (45%)
 - ▶ excess medical and prescription costs
 - ▶ Criminal justice costs accounted for \$5.1 billion (9%)
 - ▶ correctional facility (\$2.3 billion)
 - ▶ police costs (\$1.5 billion)

Community Perspectives:

Dr. Francis Cook:

“in the past doctors were actually encouraged to prescribe narcotics for chronic pain, so as the older generation of doctors transition out of medicine they will be leaving their patient's, who have been on narcotics long term, to the care of their younger counterpart's. The younger generation of doctors is not as amenable to prescribing opioids for chronic pain, so this is going to cause an issue for many of these patients.”

“I don't think patients who are long term narcotic users will want to switch to alternative treatments, however alternative treatments could be beneficial for new chronic pain patients that have not yet been prescribed to opioids.”

“I have recommended acupuncture and biofeedback to some chronic pain patients, however I never receive any notices from alternative medicine practitioners asking me to send them my chronic pain patients, so I'm not sure about other options”

Licensed Acupuncturist:

“I have been practicing acupuncture for 15 years, the first 10 in New York City, and the past 5 here in my home state of Vermont. I have been so pleased with the willingness of MD's here to refer patients out for acupuncture. Some of that is because of patients reporting successful outcomes to their physicians, but I am sure that a lot of it has to do with acupuncture having more and more research backing. In New York City I was only ever referred to by reproductive endocrinologists and addiction specialists. Here in Vermont I receive referrals from pain management clinics, neurologists, rheumatologists, pulmonologists, cardiologists, obstetricians... and weekly!”

Acupuncture Patient:

“Acupuncture has been incredibly helpful for me in overcoming my chronic pain. When I began my pain was a 10/10, and it is now down to a 4/10 after 2 sessions per week over the course of 6 weeks.”

“I know someone who had exhausted every option western medicine could offer, and was still experiencing debilitating chronic pain. He had multiple surgeries, and he had been on every available pain medication. He finally tried acupuncture, and it worked! His pain has been greatly reduced with regular sessions, and his quality of life has drastically improved since beginning acupuncture.”

Intervention and Methodology

- ▶ A handout for healthcare providers and patients which provides current scientific information about alternative methods of pain management.
- ▶ Discussion with providers regarding recognizing individual chronic pain patients who may be interested in complementary approaches to managing their pain

Results/Response

- ▶ Literature review on complementary and alternative medicine therapies including: Acupuncture, Cognitive Behavioral Therapy, Hypnosis, Craniosacral Therapy, Binaural Beat Therapy, Flotation-REST
- ▶ Informational handout for practitioners and patients left with Mad River Family Practice

Evaluation of effectiveness and limitations

- ▶ Effectiveness:

- ▶ Identify if there is a change in the quantity of opioids prescribed for chronic pain since providing patient's with information on alternative treatments.
- ▶ Identify if providers report more willingness to recommend alternative treatments, despite the lack of EMB, after considering alternative treatments in the context of the individual patient.
- ▶ Identify patient's that have sought out any of the alternative treatments recommended, and then assess efficacy of intervention. Also assess the trend in their use of or perceived need of opioid medications for chronic pain.

- ▶ Limitations:

- ▶ Healthcare providers will likely be skeptical of recommending these therapies to their patient's until there are more large scale randomized controlled trials supporting their efficacy.
- ▶ Many patient's will not be willing to try complementary or alternative therapies. It will be up to the healthcare practitioners to use their clinical judgement to decide which patient's would be open to a trial of these methods before resorting to narcotics.
- ▶ Many of these therapies require highly trained practitioners.
- ▶ Securing insurance reimbursement for some of the more non-conventional treatments may prove to be a challenge.

Recommendations for future interventions/projects

- ▶ Identify patient's utilizing alternative treatments for chronic pain, and asses the efficacy and accessibility of these treatments.
- ▶ Identify additional alternative treatments and the characteristics of individuals whom have reported significant benefits.
- ▶ Assess the feasibility of education on alternative therapies being incorporated into the medical school curriculum.

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