

## Overview of Cancer Pain Management Present Status, Therapeutic Approach

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*Available evidence from virtually all countries suggests serious deficiencies in the satisfactory management of cancer pain. Yet the present state of scientific knowledge and the many examples of effective delivery of pain control are such as should allow this situation to be reversed*

The pathophysiology of pain is now much better understood. Many biochemical and cellular components contribute to the initiation, spread and appreciation of a painful stimulus, and their elucidation has led to a more comprehensive awareness of both the contributors to pain discomfort and the several mechanisms by which that discomfort can be reduced. At peripheral, spinal and central levels there is increasing opportunity to moderate the transmission of painful stimuli and to relieve pain suffering and maintain physical and emotional function.

From a brief summary of some of the more recent understandings about pain, some guiding principles for management allow more specific guidelines to be developed.

Such principles include:

- The patient's account of pain is believed; it is an essential starting point.
- Anticipation and prevention of pain improves well-being more than treatment of established pain.
- Pains are often multiple, and the type and cause of each pain needs careful diagnosis.
- Unrelieved pain distorts neural responses and leads to increased discomfort.
- The patient should be helped to participate in the management of pain through receiving accurate information about the causes of pain and the goals of treatment.
- A multi-modal approach to management is desirable and will require cooperation and liaison with other relevant disciplines.
- Because there is no perfect analgesic, a range of analgesic and adjuvant medications is made available for pain management and all health workers are informed about their proper use.
- Decision-makers, health professionals and the public accept the need for minimal practicable restrictions on the availability and use of opioid drugs.

Models of delivery of pain management best incorporate these principles when they provide:

- Patient-centred care which addresses what matters most to the patient and family.
- Ready access to effective therapies in all patient locations.
- Comprehensive attention to emotional and spiritual discomfort as well as physical unease.
- Continuity of care throughout the period of illness.
- Effective teamwork with mutual recognition of skills among involved professionals.
- Regular review of progress.