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Relief for Cancer Pain

Relief for Pain Is Possible

Sometimes cancer causes pain. Cancer pain may be dull, achy or sharp. It can be constant, on and off, mild, moderate or severe. But pain with cancer is not something you have to tolerate or live with.

There are many ways to treat or control cancer pain. This material includes information about medications and other methods that can help with cancer pain. Read this information to learn what may help you and how to work with your health care team to make sure your cancer pain is controlled.

It is important to **talk with a member of your health care team if you have pain**. Just as important, tell your health care team **if what you are doing for pain relief is not working or is causing you concerns or problems**.

If you have any questions about the information in this material, talk with a member of your health care team.

What causes pain in people with cancer

Cancer can cause pain when it grows into or destroys tissue near the cancer. Pain can come from where the cancer started or from any areas where the cancer has spread. As a tumor grows, it may put pressure on nerves, bones or organs and cause pain.

Chemicals that cancer may secrete into the tumor area may cause pain.

Cancer treatments, such as chemotherapy, radiation and surgery, are another possible source of pain. Surgery can be painful, and it may take time for you to recover. Radiation may cause a temporary burning sensation or other discomfort to the treatment area. And chemotherapy can cause painful side effects that include mouth sores, diarrhea and nerve damage.

People with cancer can have pain that is not specifically related to their cancer or its spread.

It's important to talk with your health care team about your pain so that they can determine the cause of the pain, which may be related to cancer or not.

Discuss Pain With Your Health Care Provider

If you have pain that bothers you or keeps you from doing the things you want and need to do, tell your health care provider or another team member. Your health care provider needs to know this to better care for you. Although no one can guarantee that all pain can be completely eliminated, most pain can be lessened, hopefully to the point where you can be comfortable.

It may help to keep track of your pain by noting:

- How strong it is.
- Where it is located.
- What brings it on.
- What makes it worse.
- What makes it better.
- Anything else that happens when you have pain.
- What you have used to relieve the pain and how it has worked.

Talk about this information with your health care provider. If it is helpful, keep a written record of this information that you can bring to your appointments.

Your health care provider may ask you to rate your pain on a scale from 0 to 10 – with 0 being no pain and 10 being the worst pain you can imagine.

Your health care provider can use this information to monitor your pain and make any treatment adjustments. This information will not be used to compare your pain with others.

Your health care provider is trained to help treat your pain or direct you to resources or other health care providers who can help you.

Don't let fear and worry stop you

Being afraid or worried is common, but do not let this stop you from telling your health care provider about your pain. For example, you may fear that pain means your cancer is getting worse. You may worry that your health care provider will think you are a complainer if you are completely honest about your pain. You may feel that because you have cancer, you are supposed to have pain and be able to deal with it. These simply are not true.

Planning for pain management

You and your health care provider can set a goal for pain management. Then you can monitor the success of the treatment against that goal. Your health care provider can track your pain from

appointment to appointment. The goal is to keep the pain at or below the level that keeps you comfortable. If this is not happening, tell your health care provider.



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Treating Cancer Pain

The ideal way to treat pain that is directly caused by the cancer is to shrink or remove the cancer. This may be done with surgery, chemotherapy, radiation or another form of treatment. These treatments take time to work. Sometimes they can worsen the pain for a time.

Some cancers cannot be treated directly. And sometimes pain is caused by other factors.

A wide range of pain relief medications and non-medication therapies can effectively treat or ease pain. Talk with your health care provider about these treatments and the state of your cancer regularly.

Pain relief medications

These include:

- Over-the-counter (OTC) and prescription-strength pain relievers, such as aspirin, acetaminophen (Tylenol™, others), and ibuprofen (Advil™, Motrin™, others).
- Medications that can be put on the skin to treat specific types of pain.
- Antidepressant medications to help treat pain that is due to damaged nerves.

- Opioid medications, such as morphine (Avinza™, Ms Contin™, others), oxycodone (Oxycontin™, Roxicodone™, others), hydromorphone (Dilaudid™, Exalgo™), fentanyl (Actiq™, Fentora™, others), or methadone (Dolophine™, Methadose™). They can safely provide relief from pain and are not illegal when taken appropriately and under the supervision of your health care provider.

Most medications are available to take by mouth. If taking pills, liquids or rapidly dissolving tablets is not an option, many medications can be given by a patch on the skin, through a vein (intravenously), or in the rectum.

Medications to decrease inflammation

Sometimes cancer causes inflammation which can produce pain. Medication that decreases inflammation can help lessen the pain. These medications include steroid or non-steroidal anti-inflammatories such as ibuprofen or Naprosyn.

Medications to strengthen bones

Cancer often causes pain when it travels to the bone and harms the bone. Medication can strengthen bones and decrease pain. These medications include zoledronic acid or denosumab.

Other pain relieving medication can treat bones directly with an intravenous (IV) injection. These medications include strontium, suramin or radium.

Specialized procedures

While most pain from cancer can be controlled with medications, some people continue to have significant pain. Specialized procedures may be recommended to ease pain.

For example, a pump may be placed under the skin to deliver pain medication directly to the spinal cord.

A nerve or several nerves in a specific area of the body may be identified and blocked with a procedure that deadens nerves. A nerve block uses a medication that is injected around or into a nerve to stop pain messages traveling along that nerve pathway from reaching the brain.

Your health care provider can determine whether referral to a pain specialist may be helpful for treatment of your specific pain.



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Other pain relief methods or therapies that may help

Many non-medication treatments may be used to help manage cancer pain, but how effective they are remains uncertain. They can be used along with pain medication. Sometimes they can be used alone for mild pain or discomfort. These methods include:

- Acupuncture.
- Acupressure.
- Physical therapy.
- Yoga or Tai Chi.
- Massage.
- Heat or cold therapy.
- Transcutaneous electric nerve stimulation (TENS).
- Relaxation using deep-breathing techniques, progressive muscle relaxation, and others.
- Meditation.
- Biofeedback.
- Imagery.
- Music therapy.
- Aromatherapy.
- Humor.
- Distraction.
- Emotional freedom techniques.
- Hypnosis.
- Emotional support and counseling.

Your health care provider or other team members may refer you to a specialist for some of these methods or therapies, or suggest possible resources for others. The National Center for Complementary and Alternative Medicine (NCCAM) is another resource for more information.

Side Effects of Pain Medication and What You Can Do About Them

Some people fear side effects from pain medications. They are afraid of being sleepy or unable to communicate with family and friends. They fear acting strangely or being seen to depend on medications. People also sometimes fear that taking morphine may shorten their life. **There is no evidence of any of these happening when the medication is dosed correctly and taken as prescribed.** And although strong pain medication can cause drowsiness when you first take it, that side effect usually goes away after you take it on a regular basis.

Pain medications each have their own side effects that you and your health care provider should talk about before you take them.

Constipation is a common side effect of many pain medications, especially opioid medications. While many side effects of pain medications go away over time, constipation does not. It must be managed consistently. Ways to prevent constipation include to:

- Take stool softeners and/or laxatives. Talk with your health care provider before using suppositories and enemas.
- Drink enough fluid every day.
- Exercise, such as walking.

Nausea is a common side effect of opioid medications. This often goes away once a steady amount of medication stays in your body. But adding anti-nausea medication may be needed.

Other side effects of strong pain medications include confusion, lethargy and sleepiness. How severe these effects are depends on each person. They often happen with the first several doses. But once a steady amount stays in your body, the side effects usually go away. If they do not go away, changing to a different pain medication may help. Hallucinations and behavior changes are not common but can happen and should be discussed with your health care provider right away.

Less strong pain medications also have side effects. Talk with your health care provider before you take them. For instance, common OTC pain relievers can affect your kidneys, cause ulcers or increase your blood pressure. Aspirin can cause gastrointestinal bleeding. Acetaminophen can cause liver damage if you take too much. For these reasons, it is important that your health care provider know about all medications you take, including OTC medications, vitamins and herbal supplements.

Tell your health care provider if you have any ill effects from the medications you take.

Response to Common Concerns

Too often, mistaken beliefs and attitudes keep people from seeking the pain relief that is available. The following are responses to common concerns about using medication to control cancer pain.

If I take morphine or other opioid pain medication, I will become addicted.

This is highly unlikely when you take medication for pain. If you take pain medication when you are not in pain or to get high, then, yes, you can get addicted.

Fear of addiction to pain medication is often the reason people in pain do not seek the relief they need. Cancer patients rarely become addicted to pain medications when they are taken as prescribed.

It's better to tough out the pain and wait until it's severe before I take medication. I don't want to be a complainer.

It's not a good idea to wait. If your pain interferes with your sleep or daily activities, tell your health care provider. **Pain is easier to control in its early stages before it becomes severe.** The longer you endure pain before you take medication, the more likely you'll need larger doses to control it.

I know I'm addicted because I get jittery and sweaty after I stop taking my pain medication.

Your body naturally gets used to most medication after you take it for several weeks. This is called physical dependence. This is not addiction.

You can prevent symptoms such as jittery feelings, sweating or abdominal cramps by gradually lowering the dose of your pain medication over several days. Work with your health care provider

to set up a schedule to decrease your dose of pain medication. Never stop your medication suddenly, unless your health care provider tells you.

As the cancer responds to treatment, you may be able to decrease your pain medication.

I must be getting immune to my pain medication because it doesn't work as well as it used to.

It is highly unlikely that you are becoming immune. You may be experiencing tolerance to the pain medication as your body gets used to it. Another possibility is that the cancer is getting worse, and you may need more medication to control your pain. **Do not increase your dose before you talk with your health care provider.** He or she may increase the dose of your medication, add another medication for pain relief, or have you change to a different medication.

“Breakthrough pain” is common with cancer pain. This means you may be having an episode of increased pain from time to time. Your health care provider can give you a short-acting pain medication to treat this. If you need more of this medication, your health care provider can increase the dose of your long-acting medication.

I would rather live with the pain because I don't want to lose control by being on pain medication.

You may feel sleepy or foggy when you first start taking pain medication, but this often goes away after a few days. Pain itself can cause fatigue, depression, anger, worry, loneliness and stress. Maintaining the right pain control can help with sleeping, eating, interest in work and hobbies, and general enjoyment of life.

My family is concerned that I am becoming addicted to my pain medication. I am using more pain medication now than before, but my pain is increasing. I don't know how to help them understand.

Pain is a personal experience. No one but you knows what your pain feels like. Everyone has the right to pain relief.

It might be a good idea to have your health care provider talk with family members about their concerns. Your health care provider can explain the concepts of tolerance and addiction.

My health care provider wants me to consider an invasive procedure for my pain. Shouldn't I wait until all other options such as medications have been tried?

Pain needs to be treated as aggressively as the cancer that causes it. People who have their pain well-managed do better than those with poorly controlled pain. Your health care provider may refer you to a pain specialist who can perform procedures to lessen pain or provide different ways for pain medication to be delivered. These procedures can help lessen the amount of medication needed to treat pain and may limit the amount of side effects from pain medications.

Palliative Care Is Available

Talk with your health care provider about palliative care. It can be used to manage pain and any other symptoms or issues related to your cancer diagnosis. These may include constipation, trouble breathing, nausea, trouble sleeping, anxiety and depression.

Palliative care uses a multidisciplinary team approach to care. Team members work along with your health care provider to address your needs.

Palliative care can provide you with an improved quality of life.



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