**COE Learning Network:** Pain Management for Individuals with Substance Use Disorder

**Presenters:** Michael Palladini

**Date and Time:** 04/19/2023 1:30-2:00pm

**Location:**Virtual Training (on Zoom)

**Host:**University of Pittsburgh, School of Pharmacy, Program and Evaluation Unit (PERU)

**Target Audience:**Centers of Excellence Leadership and Staff

**Training Objectives:**

* Recognize the effect that pain has on substance use
* Discuss the stigma related pain management for those with substance use issues
* Discuss selecting an appropriate pain management referral
* Discuss the relationship between medications for opiate use disorder and pain

**Agenda:**

1. Welcome, introductions, training objectives
2. Chronic pain statistics
3. Opioid prescription trends
4. Types of pain
   1. Acute and chronic pain definitions
   2. Nociceptive pain
   3. Neuropathic pain
   4. Other types of pain
5. Assessing pain
   1. Examine patient history
   2. PEG scale
6. Patient expectations
7. Management strategies for pain
8. Behaviors related to misuse.
9. Tramadol
10. Buprenorphine
11. Gabapentinoids
    1. Gabapentin misuse
12. Principles of pain management
13. Stigma
14. Discussion
15. Questions

**Questions:**

1. True or **False**: There has been an increase in the number of prescriptions written for opioids every year since 1992.
2. The main source of information on a client’s pain history should be:
   1. Previous medical records
   2. Physicians who have treated the client
   3. **The client and the client’s caregiver (if applicable)**
   4. None of the above
3. True or **False**: The goal of pain management is to eliminate all pain.
4. The principles for managing pain include:
   1. Establish clear treatment goals.
   2. Set reasonable expectations.
   3. Use a variety of modalities to achieve treatment goals
   4. **All the above**
   5. None of the above
5. **True** or False: Stigma is a factor that affects clinicians who work with individuals with substance use disorder

**References:**

* Yong RJ, et al. *Pain* 2022 Feb 1; 163(2): 328-332
* Goldstick et al. *Jama Netw Open* 2021 Jul 1; 4(7) e21168860
* Woolf CJ. *Lancet*  1999; 353: 1959-1964
* Gordon DB, et al. *Arch Internal Med.* 2005; 165: 1574-1580
* Krebs EE, et al. *J Gen Internal Med.* 2009; 24:733-8
* Trescot, AM. Opioid Pharmacology. Pain Physician 2008;11:s144-153
* Valentino RJ, Volkow ND. Neuropsychopharmacology. 2018 Dec;43(11):2514-2520
* Fleming MF, et al. *Pain.* July 2007; 8(7): 573-582
* U.S. Department of Justice. DEA Diversion Control. DEA Diversion Control Division, https://www.deadiversion.usdoj.gov/index.html. 2009
* Fishman et al. *Current Pain Headache Rep.* 2018 Oct 5; 22(12): 83
* Collins S. *Pharmacy Today.* 2021 Oct 01; 27(10):33
* Evoy KE, et al. *J Clinical Pharmacology* 2021 Aug; 61 Suppl 2: 589-599
* Department of Health and Human Services. National Opioids Crisis. HHS.gov, 11 Jan. 2023, https://www.hhs.gov/opioids/index.html.