

Pain Medicine treats more than **800** chronic pain conditions using a multi-modal approach

- Neck pain
- Back pain
- Headache
- Chronic migraine
- Chronic facial pain
- TMJ dysfunction
- CRPS / RSD
- Abdominal pain
- Pelvic pain
- Musculoskeletal pain
- Arthritis
- Fibromyalgia
- Thoracic outlet syndrome
- Peripheral neuropathy
- Pre-operative optimization
- Chronic post-surgical pain
- Chronic CSF leak
- Post-herpetic neuralgia

Non-opioid medications

There are **200** medications in pain only about **20** are opioids

Pain Medicine specialists generally recommend non-opioid medications such as Duloxetine, Gabapentin, & Pregabalin.

Psychology

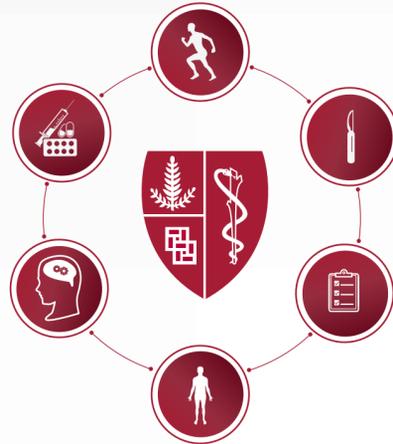
Pain is a product of the brain. It has sensory & emotional components. Psychological skills help individuals modulate pain and engage in life. Psychological treatments reduce depression, anxiety, and helplessness.

- Pain coping skills
- Biofeedback & meditation
- Free support group for individuals, family & friends
- Acceptance & commitment therapy
- Cognitive behavioral therapy

Physical therapy

Pain therapists prescribe regimens of exercise, tissue manipulation, and other treatments focused on maximizing function to help relieve pain.

- Therapy for fear of movement
- Home exercise program
- Restorative movement group



Coordinated care

Complex Care Case Managers (CCCMs) to connect community resources and reduce barriers to care.

Self-management

Empowering patients to manage their pain to maximize function.

Interventional procedures

Pain Medicine specialists master more than

250 types of **Interventional procedures** for appropriate conditions

- Epidural steroid injections for nerve impingement
- Radiofrequency nerve ablation for neck & back pain and for painful scars after surgery or trauma
- Cryoneurolysis for occipital headache
- Spinal cord stimulation for failed back surgery syndrome & peripheral neuropathy
- Intra-spinal medication delivery systems

Complementary & alternative

Pain acupuncture & evidence-based supplements.

Pre-habilitation

Optimize surgical outcomes with pre-surgery nerve & psychology treatments.

Patient-centered care

Patient Family Advisory Counsel to implement care that meet the needs of patients & their families.

Precision health care

Outcomes-based care using our open source platform for learning health systems, CHOIR (Collaborative Health Outcomes Information Registry).

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Stanford Pain Management Center

650 723 6238 <https://stanfordhealthcare.org> and search for "pain"

The Stanford Pain Management Center **requires completion of interdisciplinary evaluation** before consideration of prescription of opioid medications. For patients struggling with **substance abuse**, ongoing treatment with board-certified addictionologist is a requirement before Pain Clinic evaluation.

Interdisciplinary Pain Programs

Orofacial Pain
Collaboration with Neurosurgery, Neurology, ENT, and Dentistry

Abdominal Pain
Collaboration with Gastroenterology

Headache & Facial Pain
Collaboration with Neurology

Pelvic Pain
Collaboration with Gynecology and Colorectal Surgery

"Chronic pain affects more American adults than heart disease, cancer and diabetes combined"

Institute of Medicine

Chronic pain is a debilitating disease that affects **100** Million Americans

every year

Chronic pain costs the United States **\$635 Billion** and is the leading cause for why people are out of work



Side effects of long-term opioid use

every day

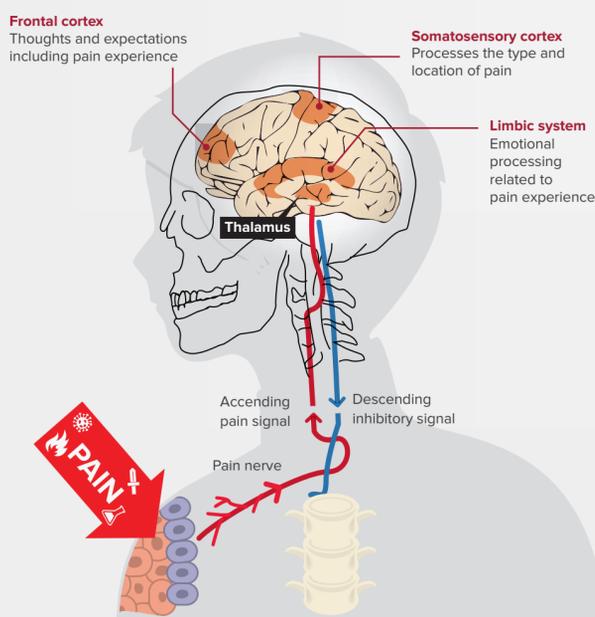
44 people in the U.S. die from overdose of prescription painkillers and many more become addicted

- Cognitive Dysfunction
- Sleep Disorders
- Drowsiness
- Physical Dependence & Tolerance
- Dry Mouth & Tooth Decay
- Opioid Induced Hyperalgesia
- Accidental Overdose & Death
- Breathing & Heart Problems
- Constipation & Bowel Dysfunction
- Low Sex Hormones
- Risk of Fracture

Centers for Disease Control and Prevention

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Pain Pathways



Nociceptive pain

Tissue or cell injury leading to inflammation & activation of "nociceptors," which transmit pain signals into the spinal cord, brain stem, and cerebrum

Neuropathic pain

Signals in the pain pathway being activated by processes that should not be painful. This can come from nerve injury, spinal cord injury, or brain injury, in the setting of impingement, trauma, surgery, or stroke.

Opioid Tolerance

Over time, opioids desensitize pain pathways, requiring ever-higher doses & causing side effects.

Opioid doses suggestive of tolerance

Codeine	150 mg	per day
Fentanyl Patch	25 mcg	
Hydromorphone	8 mg	
Methadone	20 mg	
Morphine	60 mg	
Oxycodone	30 mg	
Hydrocodone	60 mg	