What Everyone in Primary Care Needs to Know about Pain.

Kevin Cuccaro, D.O.
Diplomate American Board of Anesthesiology
Subspecialty Certification Pain Medicine
Goals of lecture

• Why is it Important?
• What is it?
• How do you manage it?
Who am I?

• Anesthesiologist
• Fellowship trained Pain Physician
• Group practice Navy
• Solo specialist
Why should you care about Pain?
“Life is Pain, Highness. Anyone who says differently is selling something.”

The Princess Bride (1987)
Why?

• Common presenting symptom
• Most common disability
• $600+ Billion Annually
• 100 Million Americans (*)
Why?

• Increased Procedures 130-700%
• Increased Surgeries 300+%
• Increased Opioids 300+%
Opioid Prescriptions Dispensed by Retail Pharmacies—United States, 1991–2011

4% of world population consume 80% of all opioids

**Rates of Opioid Overdose Deaths, Sales, and Treatment Admissions, United States, 1999–2010**

**Drug Overdose Deaths by Major Drug Type, United States, 1999–2010**

Kevin Cuccaro, D.O.  
StraightShotHealth.com
Why is this important?

• We are spending huge amounts of money
• We are performing multiple invasive procedures
• We are killing people
What Is Pain?

“Pain is an unpleasant sensory & emotional experience associated with actual or potential tissue damage or described in terms of such damage.”

IASP 1994
Pain Is...

Unpleasant

Sensory AND Emotional

Experience
Pain Experience

**Acute**
- Adaptive
- Source Defined
- “Broken Leg”
- Peripheral
- Cut, Poke, Drug

**Chronic**
- Maladaptive
- Nebulous
- “Fibromyalgia”
- Central
- No single treatment
Chronic Pain Experience

Localized

- Focal
- Sensory
- Peripheral

Widespread

- Multifocal
- Affective
- Central

Kevin Cuccaro, D.O.

StraightShotHealth.com
Central Sensitivity Syndrome

- Fibromyalgia
- Chronic Abdominal/Pelvic Pain
- Chronic Back Pain
- Chronic Headaches
- Irritable Bowel

Focal OR Multifocal
Affective
Central
Emotion

(In 3 slides or less)
Two Views of Emotion

Traditional

Emotions are less mature than reason. Negative emotions are pathologic & need rational control.

Progressive

Emotions facilitate awareness, guide & motivate behavior.
Star Trek recognized this...

Traditional

Progressive
Emotion

Emotional State vs Emotional Process
Neurobiology of Pain

(In 3 slides or less)
Three Dimensions of Pain

(Melzack & Casey, 1968)

• Sensory-Discriminative
• Affective-Motivational
• Cognitive-Evaluation
Neurobiology of Pain

Lateral Pain System

• Sensory-Discriminative
• Location, timing, physical characteristics
• Prompts withdrawal

Medial Pain System

• Affective-Motivational
• “Emotional Coloration”
• Defensive behaviors

Kevin Cuccaro, D.O.  StraightShotHealth.com
Pain Experience & Neurobiology

- Sensory
- Emotional
- Experience

- Sensory-Discriminative
- Affective-Motivational
- Cognitive-Evaluation
What are we really treating?

Nociception

• Nerve stimulation that conveys information about potential tissue damage to the brain.
• Anesthesia INDEPENDENT
• OBJECTIVE

Pain

• Perception & Response to Sensory information
• Genetics, prior learning, current psychological status & sociocultural influences
• Anesthesia DEPENDENT
• SUBJECTIVE
Influencers

- Genetic
- Epigenetic
- Developmental
- Psychosocial
Influencers

- Childhood Adversities
- Adult victimization
- PTSD
- Stressors

- Emotional State
- Emotional Process
- Beliefs
- Learning

Kevin Cuccaro, D.O.  StraightShotHealth.com  26
Pain Experience

Complex interplay between BIOLOGIC, PSYCHOLOGIC & SOCIAL factors

“Any model that focuses on only one of these dimensions will be incomplete and inadequate”

(Biopsychosocial Model)

(Gatchel & Peng, 2007)
How to Manage
To Start...

• Rule out “Badness”

• What’s on the problem list?
  – Anxiety, Depression, Abuse, Injury

• History is 90%

• Exam is 9%
Next...

• Do No Harm
• Over vs Undertreatment
• Words have Power
• Don’t dig a deeper hole
• Scheduled follow up *
Follow Up…

- Small Successes
- Encourage & Engage
- Focus on Function
- Behavioral Health
Overall

- Pain is NOT Nociception.
- Chronic Pain is NOT Acute Pain
- Numerous “Interested Parties”
- Significant Noise
Overall

The Lack of A “Good” Solution

Does Not Support A Harmful One
Questions or Comments?

Email: Kevin@StraightShotHealth.Com
Resources

- “Unlearn Your Pain” Howard Schubiner, MD
- “Back in Control” David Hanscom, MD
- “They Can’t Find Anything Wrong With Me!” David Clarke, MD
- “Relaxation Revolution” Herbert Benson, MD
Bibliography


Kevin Cuccaro, D.O. StraightShotHealth.com
Bibliography


