Pain Management for the Ages

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Course Description: This course will focus on pain and pain management options for patients within the practice of optometry. The course discusses types of, identifying, and managing pain, as well as identifying and supporting patients suffering from opioid addiction.

Course Objectives:

Upon completion of this course, attendants should be able to:

- 1. identify pain and pain severity
- 2. differentiate between treatment options for pain management
- 3. identify and distinguish signs of opioid abuse in order to provide assistance to their patients

Course Outline:

- 1) Introduction
 - a. What is pain?
 - b. Pain management for the ages- which general age groups?
 - i. Infants vs. school age vs. legal adult
 - ii. Size vs. chronological age
 - c. Presentations of Pain
 - i. Adults vs Pediatrics
 - 1. Ability to verbalize pain
 - 2. Parent/outsider observation
 - 3. Dependence on others for care
 - ii. Pain Tolerance
 - 1. Description
 - 2. Studies that show changes in pain tolerance based on ethnicity, gender, other factors
 - 3. Impact of health provider bias in understanding a patient's pain tolerance
 - d. Who can be impacted by pain?
 - i. Everyone
 - ii. Conditions that cause pain
 - 1. List of conditions that cause pain
 - a. Systemic conditions
 - b. Ocular conditions
 - c. Surgery

- 2. Timeline of Diagnosis
 - a. Pain may present prior to condition diagnosis
- 3. Chronic vs Acute Timeline of Pain Presentation
- 4. Typical timeline of when ocular pain presents
- 2) Pain Scale
 - a. Based on ages
 - b. Ability to verbalize pain
 - c. Types
 - i. Smile Faces
 - ii. Numbers
 - iii. Words on a scale
 - iv. Descriptive Words
- 3) Pain Treatment
 - a. Treating the root cause
 - b. Treatment options for Adults vs Pediatrics
 - c. Dosage determination
 - d. Non-pharmaceutical treatment options
 - i. Bandage Contact Lens
 - 1. FDA-approved lenses
 - ii. Artificial Tears
 - iii. Cold & Hot Compresses
 - iv. Essential oil (peppermint)
 - v. Sucrose in neonates
 - e. Topical Medications
 - i. Cycloplegics
 - 1. Atropine
 - 2. Homatropine
 - 3. Scopolamine
 - 4. Cyclopentolate
 - 5. Tropicamide
 - ii. Topical Anesthetics
 - 1. Proparacaine
 - 2. Tetracaine
 - iii. Topical NSAIDs
 - 1. Acular LS
 - 2. Bromday
 - 3. Nevanac

- 4. Acuvail
- 5. Voltaren
- iv. Topical Steroids
 - 1. Lotemax
 - 2. FML
 - 3. Predinsolone acetate
 - 4. Durezol
- f. Oral Medications
 - i. Aspirin
 - ii. Acetaminophen
 - iii. Oral NSAIDs
 - 1. OTC NSAIDs
 - a. Ibuprofen
 - b. Naproxen sodium
 - 2. Prescription NSAIDs
 - a. Naproxen
 - b. Indomethacin
 - iv. Opioids
 - 1. Classes
 - 2. Prescribing Privileges based on State
 - 3. Opioids Medications
 - a. Codeine
 - b. Tramadol
 - c. Hydrocodone
- 4) Considerations for Determining Pain Treatment and Management
 - a. Things to consider before prescribing
 - i. Determine Correct Diagnosis
 - ii. Personal Medical History
 - iii. Allergies
 - iv. Patient's Age
 - v. Social History
 - vi. Family Medical History
 - 1. Family history of abuse can impact personal risk
 - vii. Severity of Pain
 - viii. History of pain treatments
 - ix. Systemic disease
 - 1. Kidney disease

- a. Review kidney anatomy and function
- b. Causes of kidney disease
- c. Signs of kidney disease
- 2. Liver disease
 - a. Review liver anatomy and function
 - b. Causes of liver disease
 - c. Signs of liver disease
- x. Pregnancy status
 - 1. What medications are okay for pregnancy?
 - a. Tylenol previously looked into as possible relation to Autism Spectrum Disorder (ASD)
 - 2. Children born addicted to drugs
 - a. Neonatal abstinence syndrome, neonatal opioid withdrawal syndrome (NOWS)
 - b. Birth complications
 - i. Initial treatments and care
 - c. Infancy/childhood concerns
- xi. Other considerations and contraindications
 - 1. History of stomach ulcers
 - 2. Other medications (blood thinners, etc.)
 - a. Balancing condition priority
- b. Identifying drug abuse
 - i. Intro to Drug Abuse
 - ii. Drug Abuse Statistics
 - iii. Signs
 - iv. Symptoms
 - v. Behaviors
 - 1. Adult
 - 2. Pediatrics
 - 3. Adults seeking opioids through pediatrics
 - vi. Doctor's role
 - 1. Identifying, supporting, accurate prescribing
 - 2. Pregnancy education
- c. What can we do as providers to prevent drug abuse
 - i. Quantity prescribed
 - ii. Holistic approach
 - iii. Patient education on treatment plan

- 1. Discuss realistic expectations
- 2. Discuss limitations
 - a. Operating heavy machinery
 - b. Dietary restrictions, limiting alcohol
- 3. OTC medications can have side effects
- d. What can we do as providers to help patients who we suspect are suffering from drug abuse
 - i. Local resources
 - ii. Virtual resources