



Cancer pain relief is possible!

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Pain is one of the most common symptoms and sensations in cancer patients, this is quite common from the moment of diagnosis and during clinical treatment. It should be noted that pain can be due either to the very nature of the cancer or to a combination of factors surrounding the patient. Cancer hurts, as do its treatments, side effects, and unwanted changes in a patient's life. However, a team of pain management or palliative care specialists can work with the patient to determine if the benefits of palliative treatments can make a positive impact in their discomforts. Each of the cancer patients undergoing treatment feel different types of pain depending on the treatments they are receiving. For example, patients receiving radiation therapy may suffer from mucositis or dermatitis, while patients receiving chemotherapy or targeted therapies may suffer from spasms, itching, burning skin, bone pain, peripheral neuropathy, pain in the joints and muscles, pain crises, among others. The patient should constantly be asked about how they feel and if they can manage the pain. This includes instances when they experience pain at the beginning of their cancer treatment, when they start to experience pain during the midst of the treatment plan or when the patient already started a basic treatment for pain management and they start to feel a new pain symptom.

The most common recommendation is for the patient to consult specialists in palliative care management or pain management. It is also highly recommended that the patient keeps a personal diary to track their progress in managing pain. Thus, the patient can monitor the frequency of pain, the days when they will need more support, and which palliative care professional they would like to see more frequently. It is the patient's oncologist who is in charge of defining and prescribing the pharmacological treatment. Recognizing the susceptibility and fragility of a cancer patient's system, several aspects must be taken into account:

- a. Contraindications (if the patient already exhibits another condition secondary to cancer, it must be verified that this treatment does not counteract the effect of the primary medication).
- b. Interactions with other medications (the risk of using these treatments with others that the patient is receiving must be evaluated to assess their safety).
- c. Anticipate any adverse effects the patient may feel during their treatment.

The oncologist will monitor the patient's pain and then categorize it as mild, moderate or severe. Taking into account the pain levels of a patient, there are typically multiple approaches available for pain relief:

- a. Acetaminophen or nonsteroidal anti-inflammatory drugs for mild pain.
- b. Opioids (oxycodone, codeine, morphine) taken by mouth, infusion or injection for moderate to severe pain. However, if the pain is very advanced, acetaminophen can be combined with an opioid. The doctor has the authority to make that decision.
- c. Topical anesthetics.
- d. Neuromodulators (useful in neuropathic pain).
- e. Physical rehabilitation.
- f. Alternative therapies.

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