



# Challenges in Treating Breakthrough Pain

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# Pain is insufficiently treated according to several reports

- Despite that validation studies on the use of the WHO pain ladder report successes of 80 – 100%
- Epidemiological studies report success rates of <50% \*

\* Holtan A, Aass N, Nordoy T, Haugen DF, Kaasa S, Mohr W, Kongsgaard UE: Prevalence of pain in hospitalised cancer patients in Norway: a national survey. *Pallia Med* 2007 21(1):7-13





# What are the explanations?

- Selected cohorts in the validation studies
- The WHO and other pain guidelines are not followed
- Patients with pain are not identified in the routine practice





# How to improve pain assessment?

- Assess pain routinely in the clinic
- Identify all relevant pain dimensions
  - Intensity
  - Temporal pattern
  - Exacerbating/relieving factors
  - Location
  - Interference





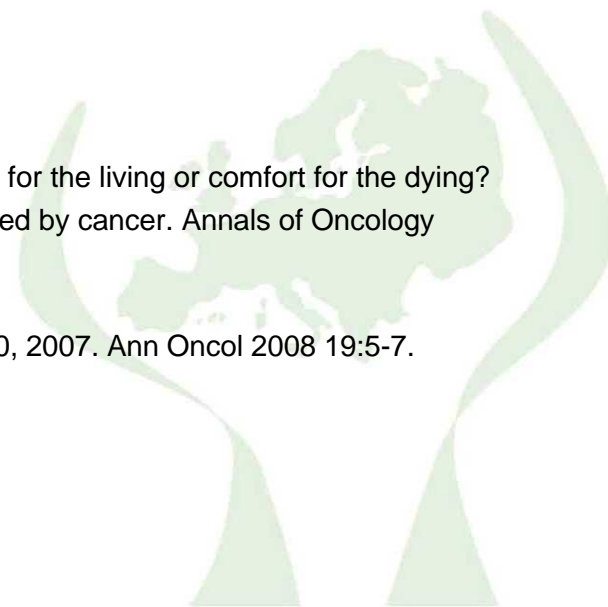
# One possible explanation for under treatment

## Patients reject to use opioids

- Opioids “a signal” of death (1)
- This fear may be a barrier for optimal palliative care (2)

1. C.M.Reid, R. Gooverman-Hill and G.W.Hanks. Opioid analgesics for cancer pain: symptom control for the living or comfort for the dying? A qualitative study to investigate the factors influencing the decision to accept morphine for pain caused by cancer. *Annals of Oncology* Advance Access published on December 10, 2007. *Ann Oncol* 2008 19: 44-48

2. M. Maltoni. Opioids, pain and fear *Annals of Oncology*. Advance Access published on December 10, 2007. *Ann Oncol* 2008 19:5-7.





- How to improve
  - Improve the attitude to treat pain
  - More focus on pain in oncology
- ‘Some solutions’
  - Integrated treatment plan between Palliative Care and Oncology
  - Improve patient communication
  - Apply simple updated guidelines
  - Change attitude of health care providers <sup>(3)</sup>



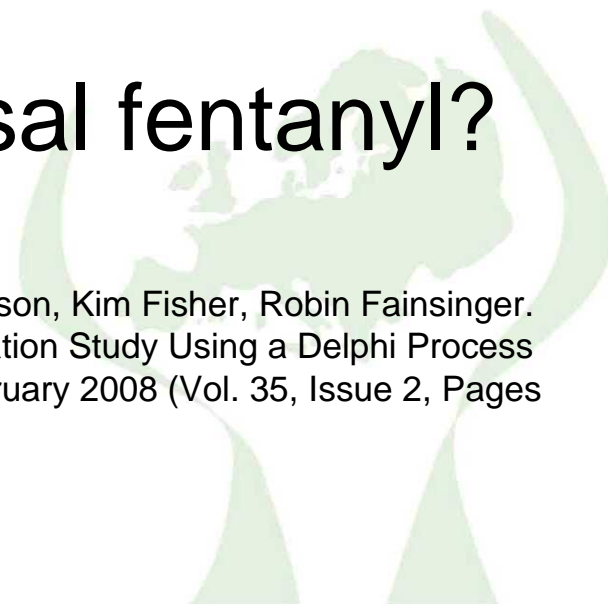




# What about BTP?

- How to assess and classify?
  - Alberta BTP Assessment tool \*
- Is BTP the appropriate concept?
- Is iv morphine or OTFC the optimal treatment?
- What is the role of intranasal fentanyl?

Neil A. Hagen, Carla Stiles, Cheryl Nekolaichuk, Patricia Biondo, Linda E. Carlson, Kim Fisher, Robin Fainsinger. The Alberta Breakthrough Pain Assessment Tool for Cancer Patients: A Validation Study Using a Delphi Process and Patient Think-Aloud Interviews. J of Pain and Symptom Management February 2008 (Vol. 35, Issue 2, Pages 136-152).





# Arterial concentration of intranasal fentanyl

