Prevalece and characteristics of breakthrough pain in cancer patient according to the Italian Questionnaire for severe episodic pain (QIDEI)

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Background

- The definition of breakthrough pain is dishomogeneous in the literature
- Lack of specific evaluation tools
- No Italian epidemiological data

BKP Prevalence

• 64% *	Portenoy	Pain	1990
• 86%	Fine	JPSM	1998
• 93%	Petzke	JPSM	1999
• 51% *	Portenoy	Pain	1999
• 89%	Zeppetella	JPSM	2000
• 93%	Swanwick	Pall Med	2001
• 41%	Gomez-batiste	JPSM	2002
• 70% *	Hwang	Pain	2003
• 65%	Caraceni	Pall Med	2004

*** Studies which used the Portenoy and Hagen BP questionnaire**

Study aims

- **Prevalence of breakthrough pain (BP) in cancer patients with chroic pain due to the disease**
- **Clinical characteristcs of BP**
- **Therapeutic approach to BP in the Italian situation**
- QIDEI validation

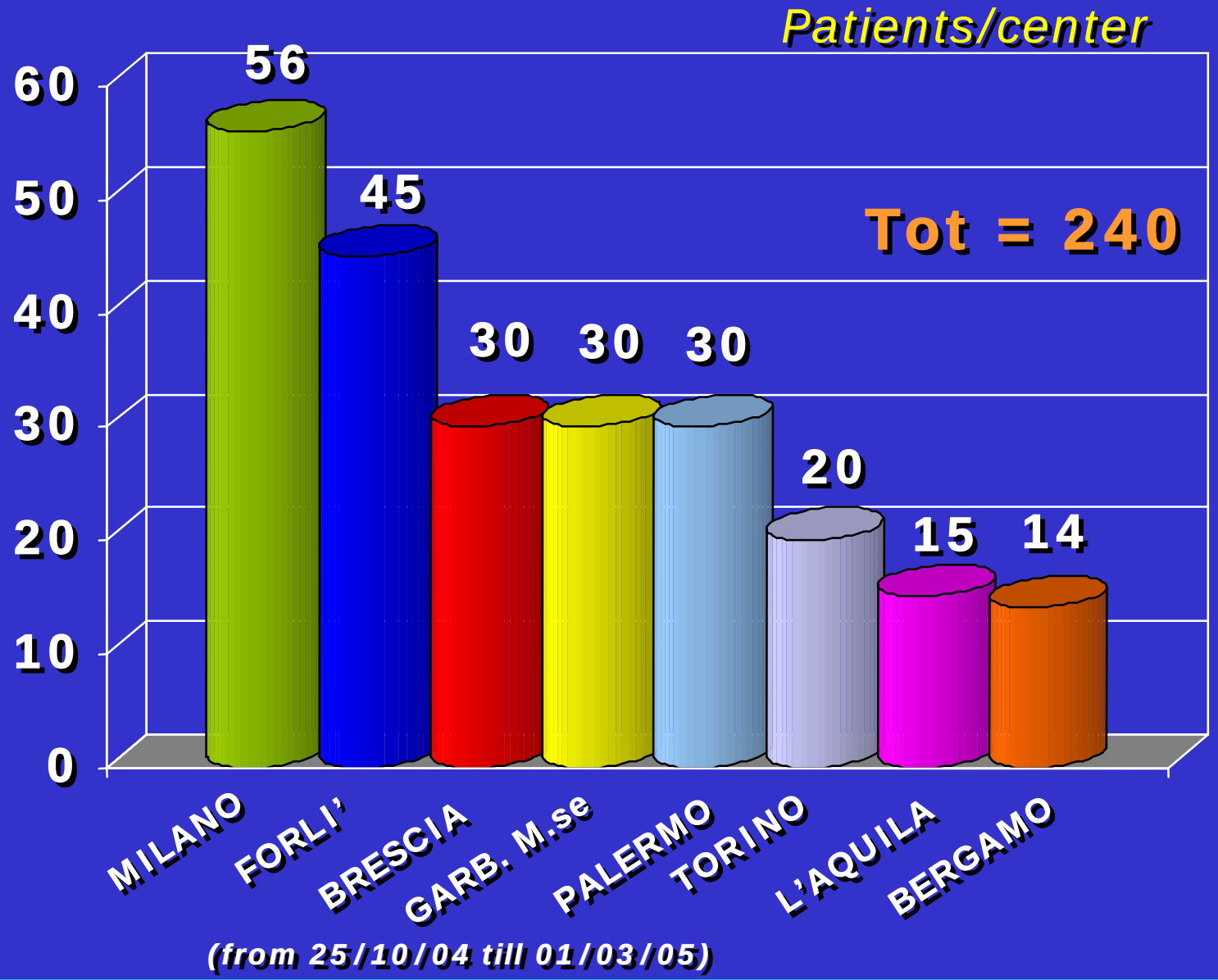
Methods

- Cross-sectional multicenter survey
- Portenoy and Hagen's questionnaire italian version (QIDEI)
- Golden standard for BP diagnosis = Expert opinion on BP diagnosis using a codified grid for classification
- Validity of QUIDEI (discussed in another presentation) shows

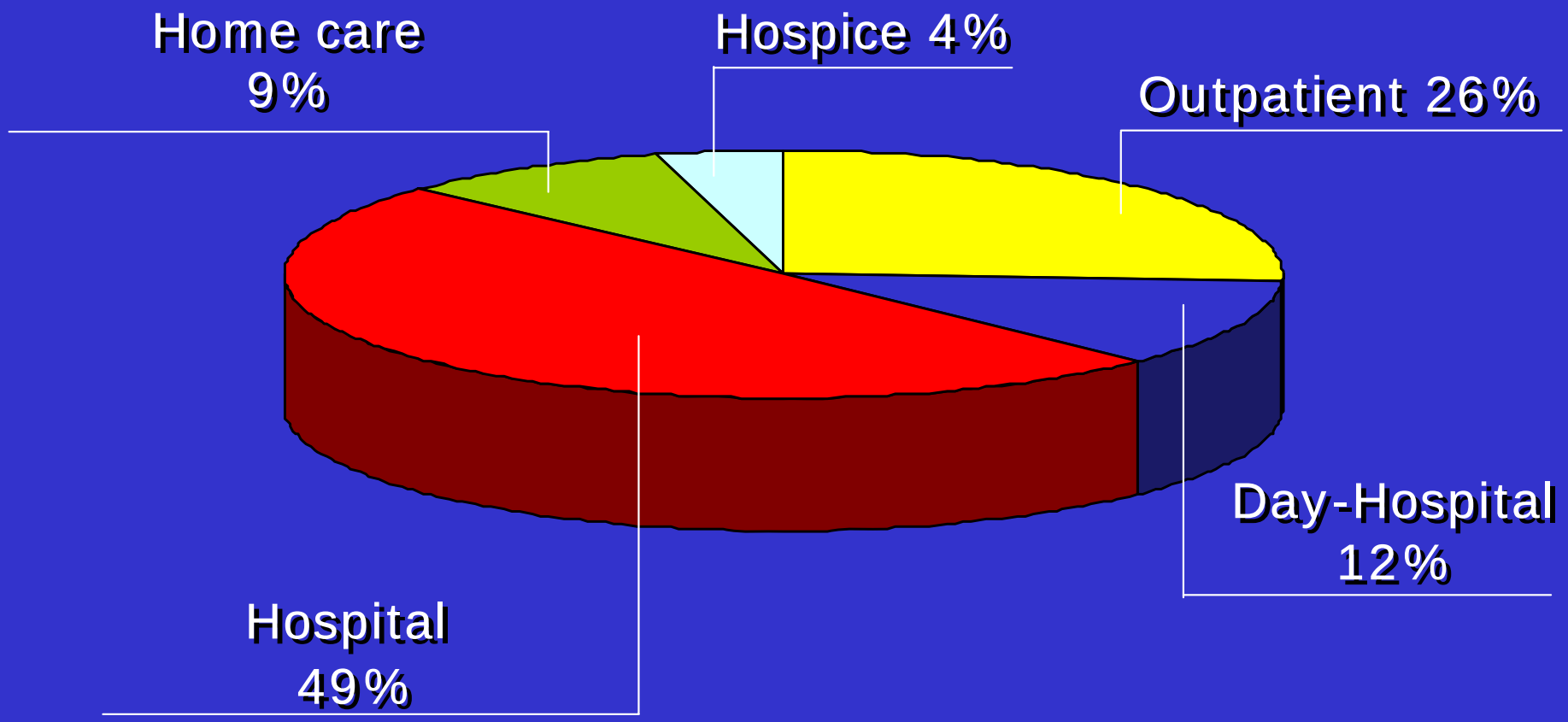
  sensitivity = 85%

  specificity = 86%

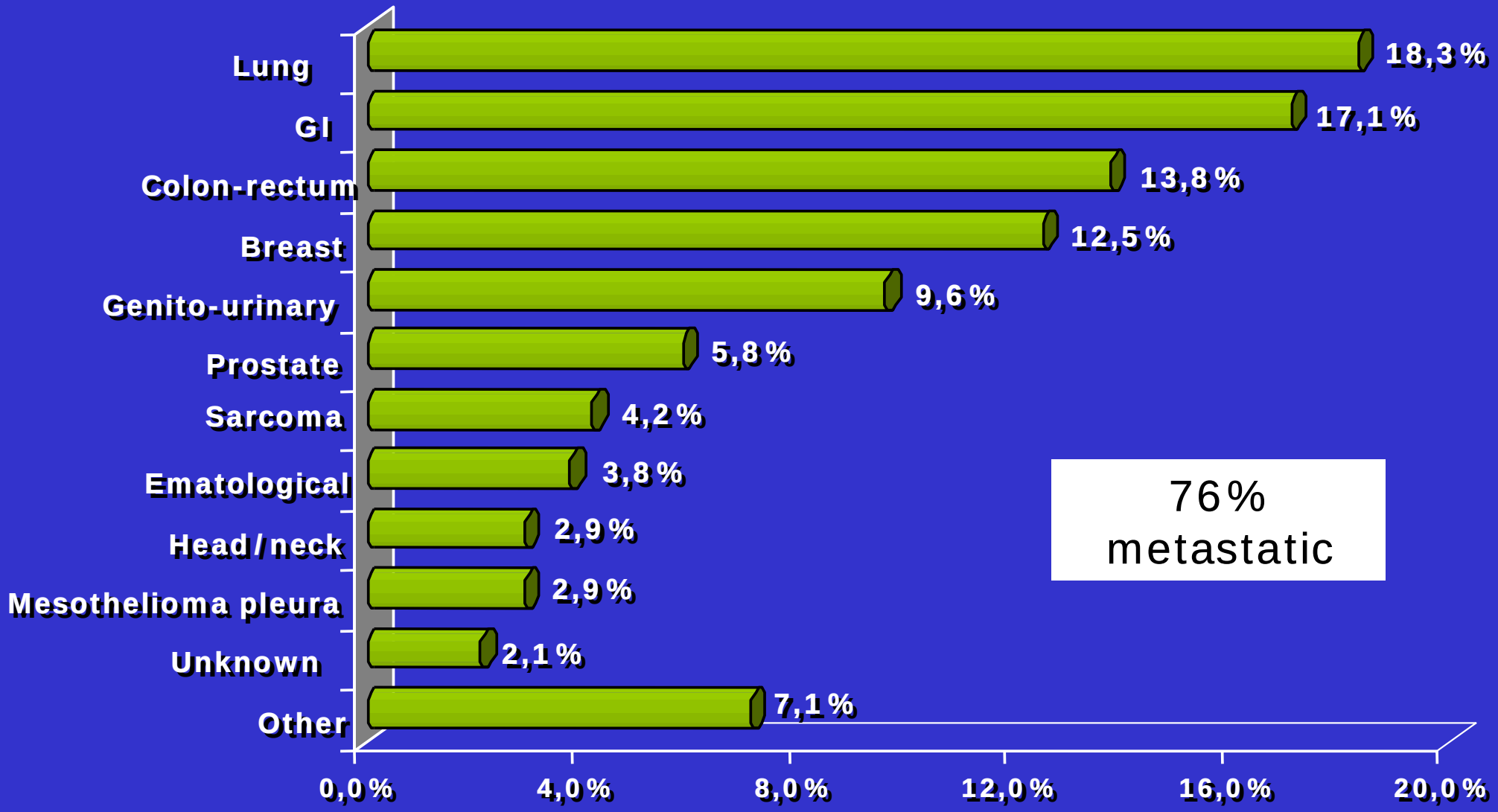
Patients accrued by 8 participating centres



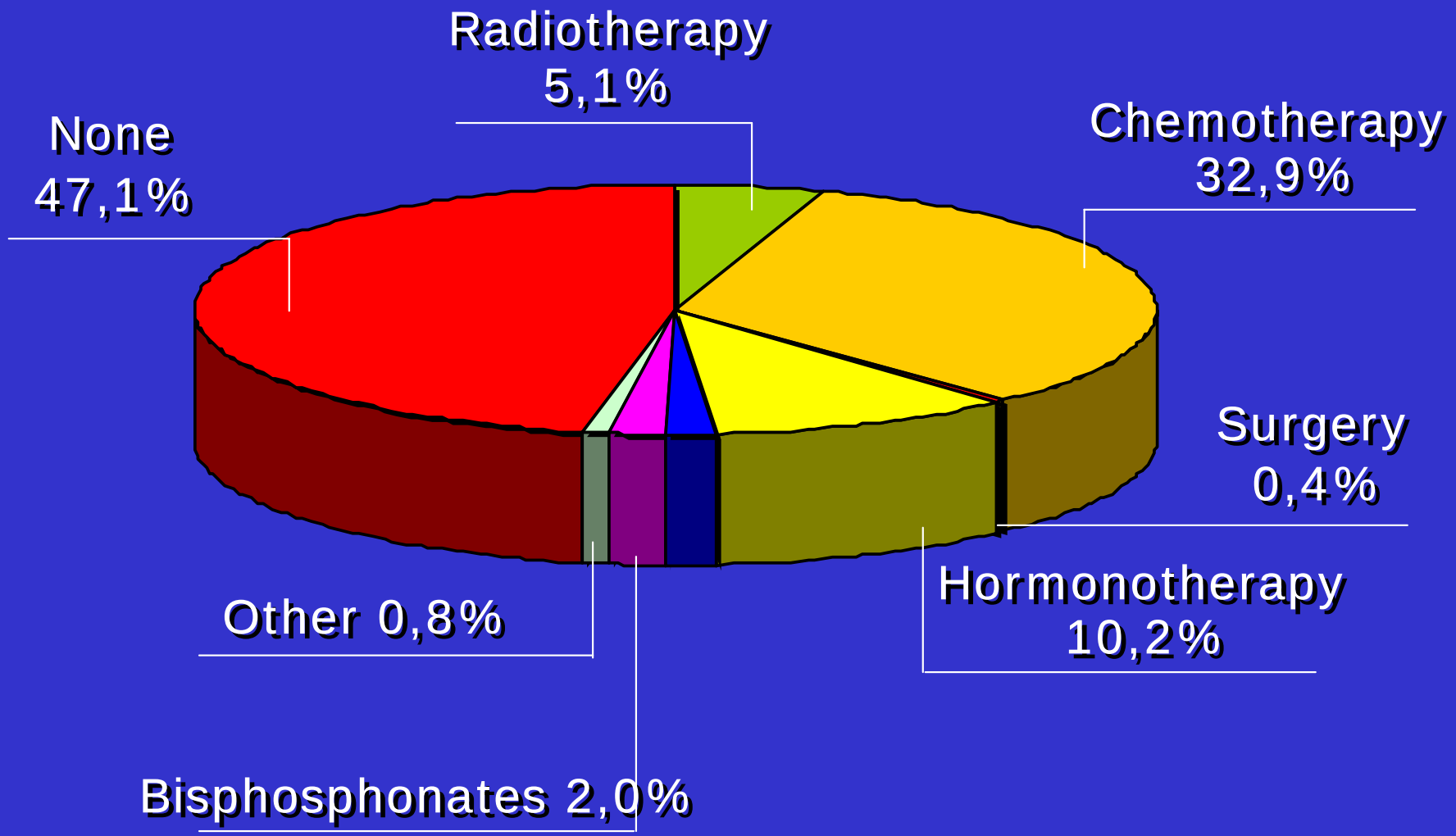
Setting of care



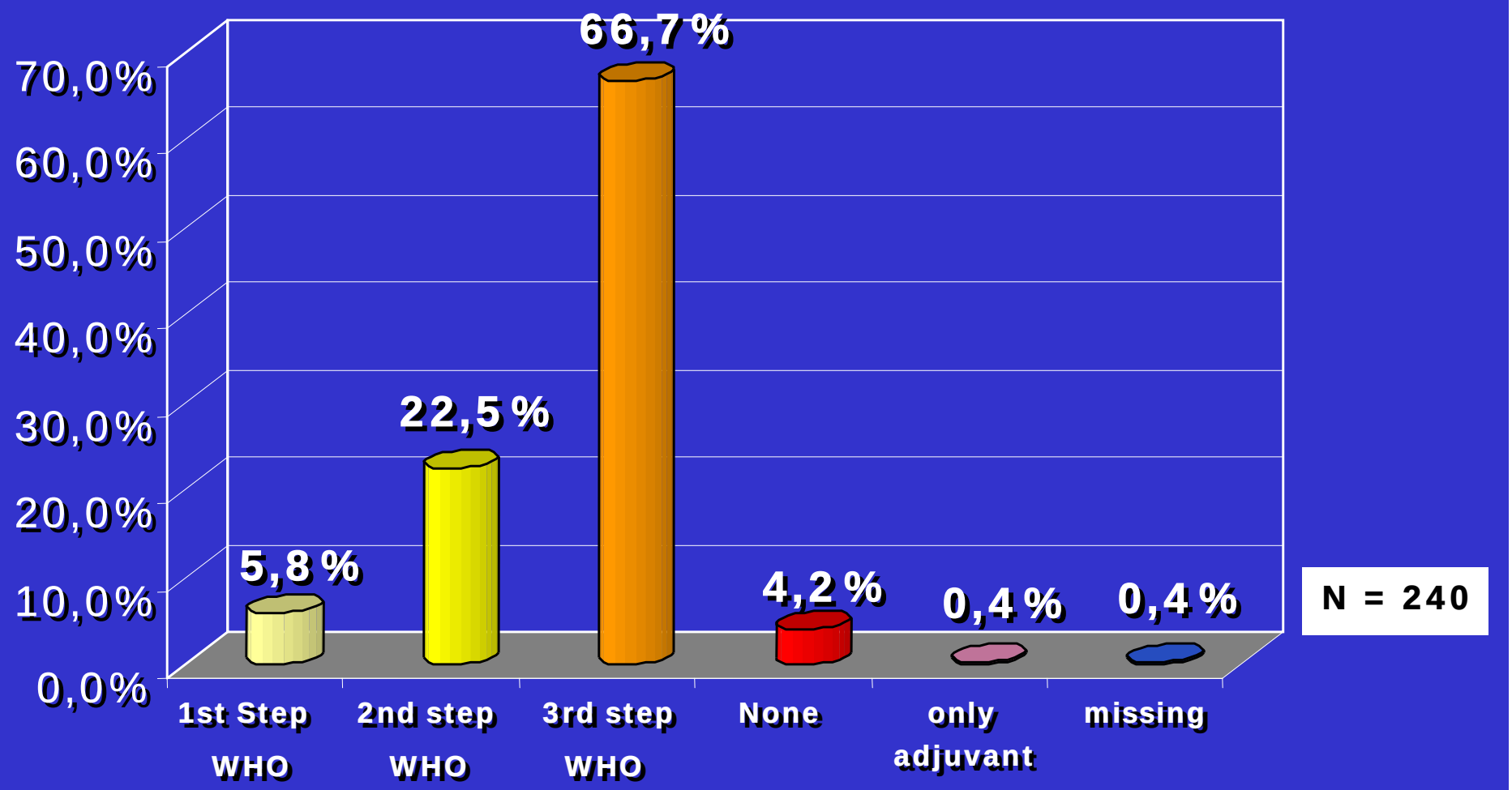
Primary neoplasm:



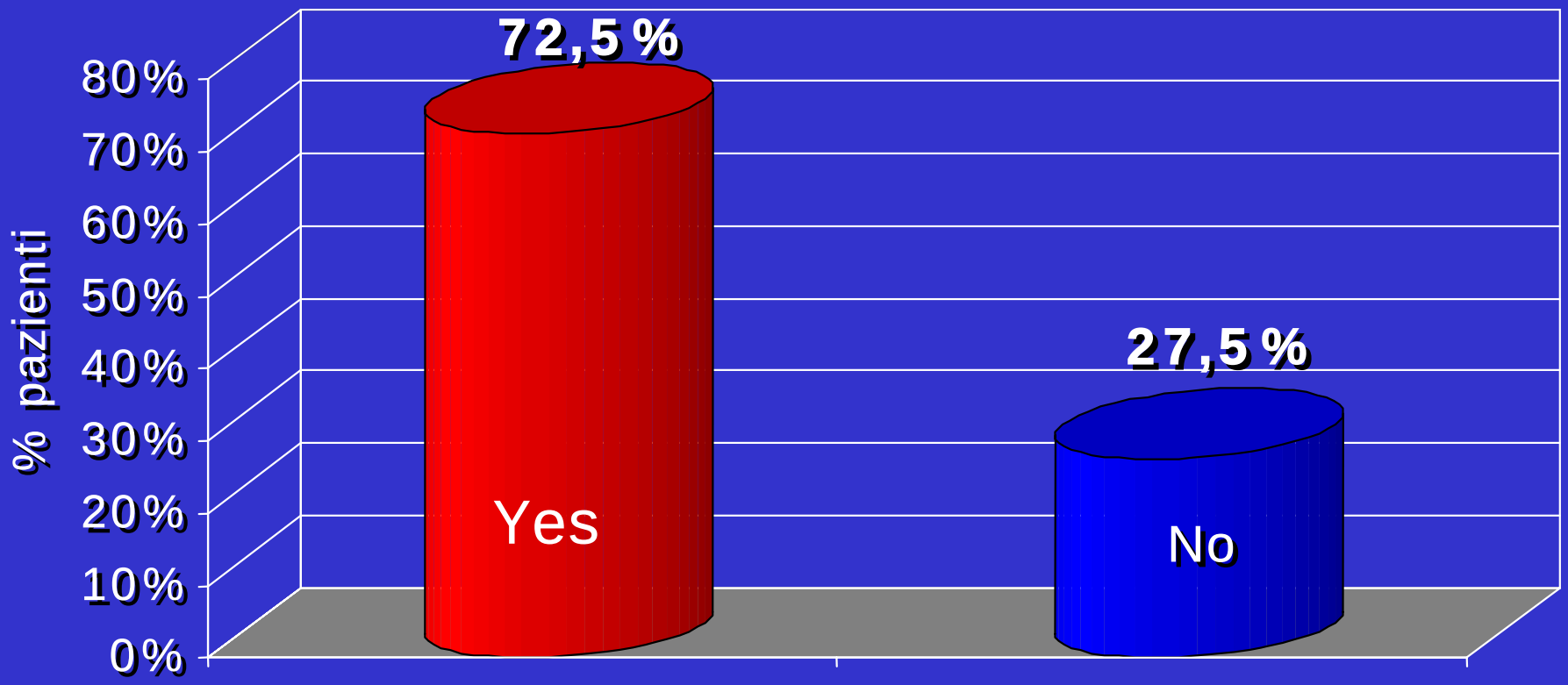
Specific treatments



Baseline pain therapy



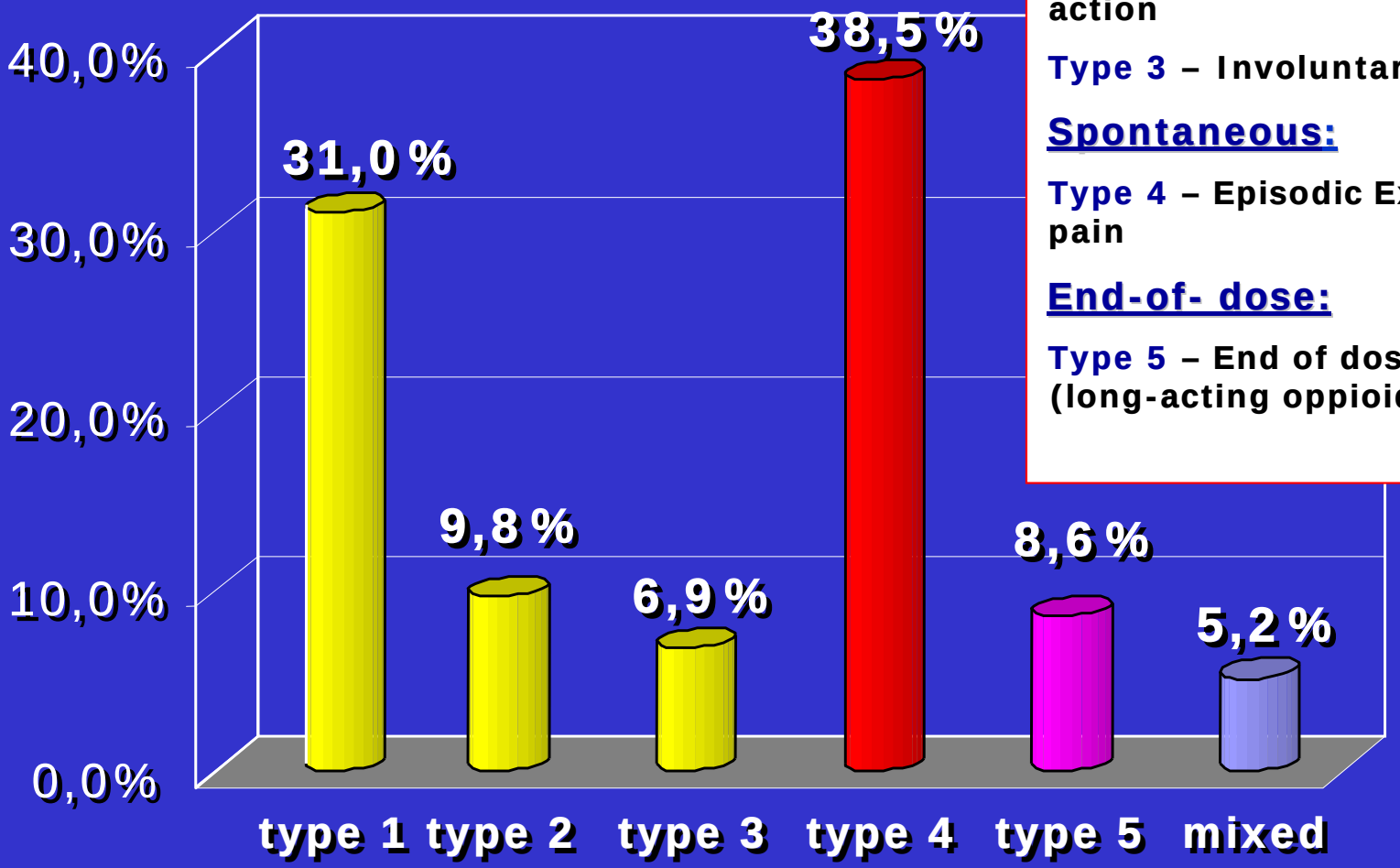
BP prevalence:



Total BP prevalence according to expert opinion N = 174/240

95% CI = 66,39 - 78,05

Classification of BPs



Incident:

Type 1 – Incident, posture

Type 2 – Partially voluntary action

Type 3 – Involuntary action

Spontaneous:

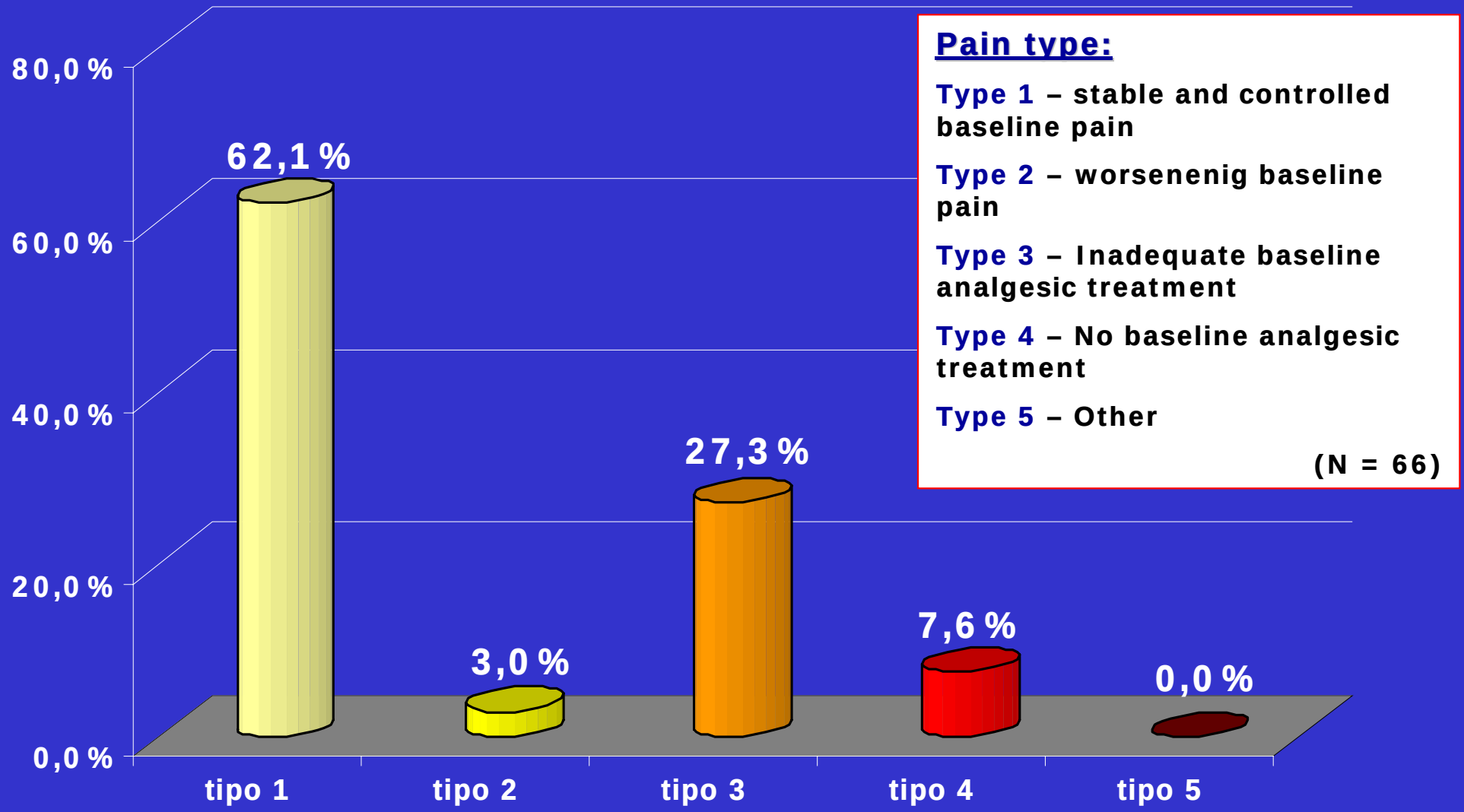
Type 4 – Episodic Exacerbation of pain

End-of- dose:

Type 5 – End of dose effect (long-acting oppioid preparation)

(N = 174)

Pain classification when BP absent



Pain type:

Type 1 – stable and controlled baseline pain

Type 2 – worsenenig baseline pain

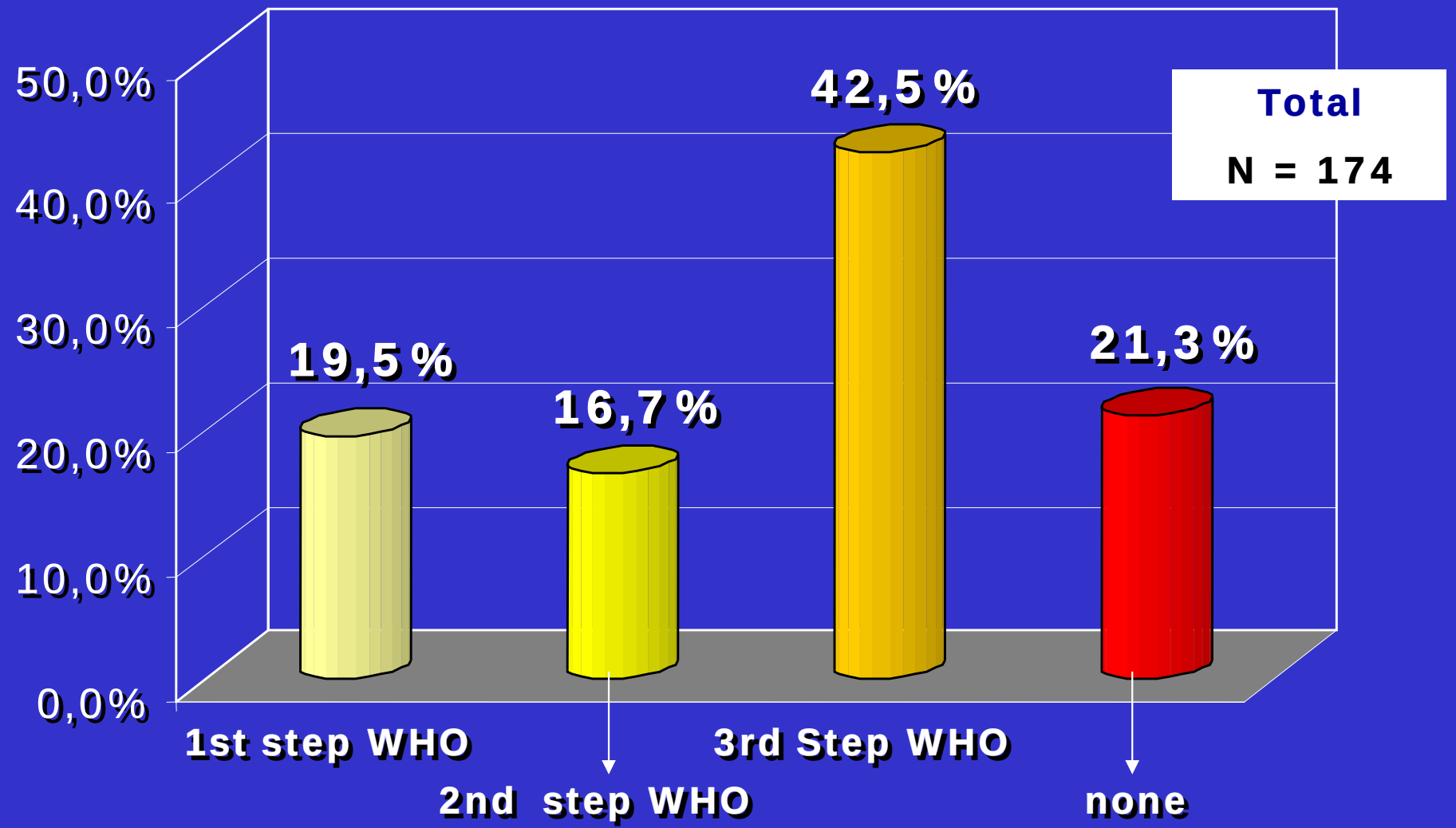
Type 3 – Inadequate baseline analgesic treatment

Type 4 – No baseline analgesic treatment

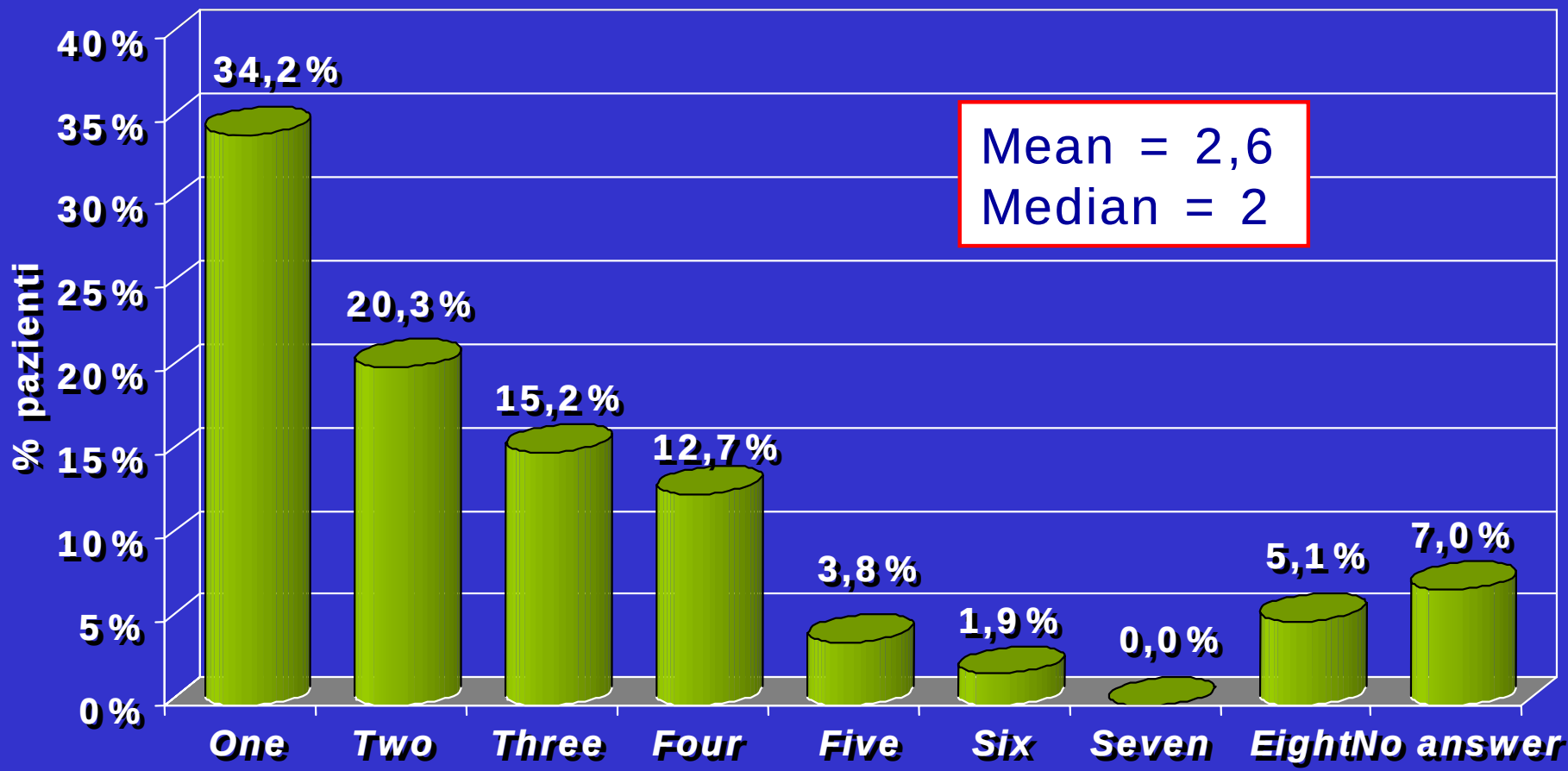
Type 5 – Other

(N = 66)

Analgesic Therapy for BP

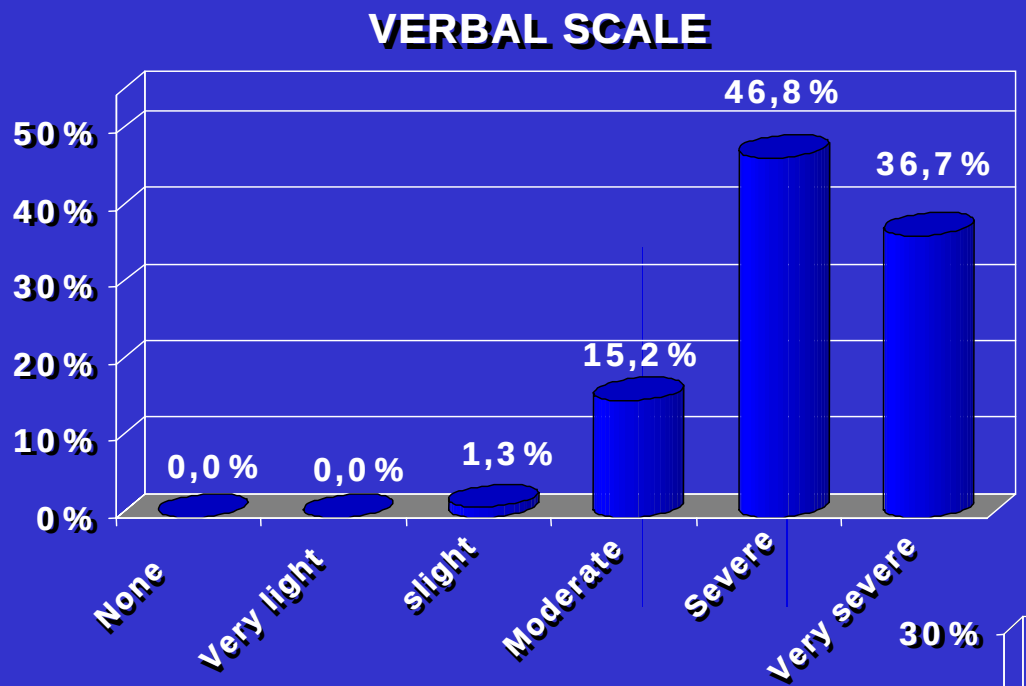


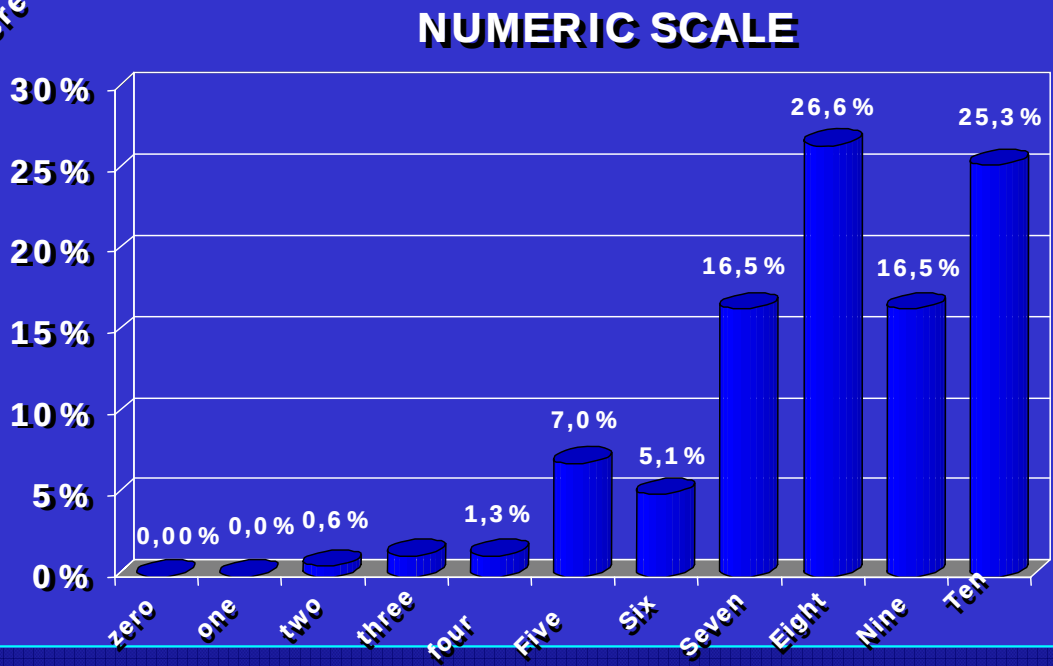
Number of BP daily episodes:



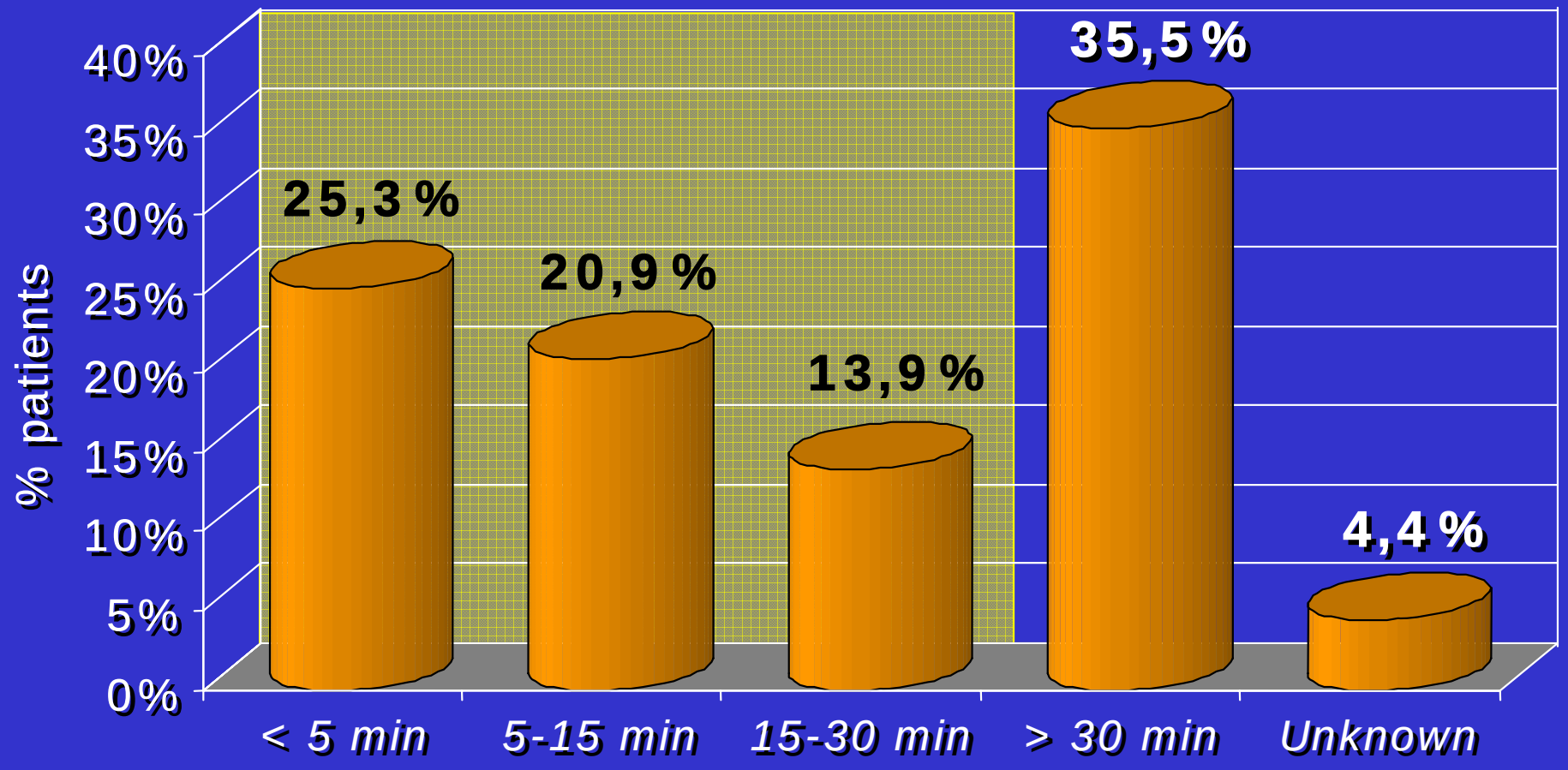
(QIDEI questionnaire)

BP intensity:





Duration of BP episodes



60,1 % of episodes last no more than 30 minutes

Conclusions (I)

- Hih prevalence of BP among cancer patients with pain = 72,5% (95% CI = 66,39 - 78,05 %)

- Recognition of BP should be limited to patients with stable and adequately titrated baseline opioid treatment

- High intensity (85% ≥ 7)

- Short duration (60,1% ≤ 30 minutes)

- Mean of 2,6 daily episodes

Conclusions (II)

- Baseline pain was treated with opiods in 89.2% of patients

- Is BP appropriately treated ?

  - 21% no treatment
  - 20% treated with NSAIDs
  - 17% treated with weak opioids