

NEWSLETTER

SPRING 2004

Our Manhattan office has moved to a new location:

**233
THIRD
AVENUE**

**At the
corner of
19th Street**

**Stop in and see
our state-of-the-
art new facility!**

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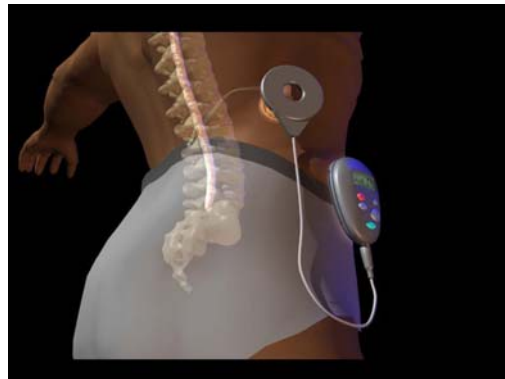
Comprehensive Pain Management

Innovative Techniques in Chronic Pain Management

Coping with chronic pain can be one of life's greatest challenges. Our goal in treating chronic patients is to give optimum pain control with the least side effects. Modalities that are common in treating chronic pain (e.g., back and neck pain) are physical therapy; oral medications; injections, such as epidural steroid injections; lysis of adhesions; facet joint injections and radiofrequency procedures.

In the event these conservative, minimally invasive modalities are ineffective, a patient may be referred for a surgical consult. Unfortunately, there are those patients who are poor surgical candidates or who may have already had surgery. In such cases there are specialized modalities that have been developed that can be used to help control pain.

Simple implanted devices such as an **Advanced Neuromodulation Systems'** spinal cord stimulator can be extremely effective in diminishing and controlling pain.



ANS Spinal Cord Stimulator

The device controls pain by gently stimulating specific nerves, thereby diminishing painful sensations. The eight-electrode system, which is placed under the skin,

is connected to a battery, or generator, which will generate a small electrical impulse. The dorsal nerves that are stimulated act to interfere with painful signals,

replacing them with a more pleasant sensation. Ultimately, its use gives a patient control over what he or she feels.

This advanced approach to pain management is useful for treating multiple pain

syndromes including sciatica, post laminectomy syndrome, neuropathic pain such as diabetic neuropathy, neuralgias and peripheral vascular disease, ischemic pain and extremity wound healing.

FAQs on Spinal Chord Stimulators

How do I know if spinal cord stimulation will work for me?

When first evaluated by our board certified physicians, you will undergo a full history and physical exam. If your diagnosis is one that will benefit from spinal cord stimulation and we find that all available less invasive treatments have been tried and failed, we will recommend you for a trial stimulation.

What are the risks involved? Is SCS safe?

Spinal cord stimulation has been used safely for over two decades. The U.S. Food and Drug Administration (FDA) has approved SCS for use with multiple types of pain. Risks can include hematoma, infection, failure of the stimulator and isolated nerve injury.

What is a trial spinal cord stimulation?

An ANS spinal cord stimulator trial is done with temporary leads. The leads are inserted under fluoroscopic guidance and left in place for a few days. This procedure takes approximately one hour and is done under light sedation. The trial gives patients the opportunity to experience what the stimulation feels like and to determine if it is beneficial for them.

The Weight Trap

Q: Is weight loss a frequently used tool in pain management?

A: Yes. Diet changes, oral medications like (ie: **Zonegran**, **Topamax**) and pain-reducing exercise programs such as aquatherapy and tai-chi are some of the modalities used in treating pain which may also help with weight loss.

Q: Do overweight patients experience the same level of pain as patients of normal weight?

A: No. Excess weight can significantly increase back, neck, joint and myofascial pain.

Q: Do chronic pain patients have a greater risk of weight gain?

A: Yes. Forced activity reduction due to pain, depression, boredom and steroid/medication use all can cause weight gain.

New Approaches To Conquering Pain

New advances in science and pharmacology have led to the release of new medications and delivery options that are revolutionizing the treatment of pain. In the past, patients had limited options for taking medication to treat pain, usually taking a pill every 3 to 4 hours to provide relief.

One new method for delivering pain relief is the transdermal skin patch. A small, thin patch is applied to the skin and can provide pain control for as long as 72 hours. This finding has led to new transdermal treatments for shingles, neuropathic pain, opiate dependency and atypical pain states (i.e., Duragesic, Lidoderm, Clonidine, Ketamine, Carbamazepine and Ketoprofen).

For severe pain, oral narcotic pain medications are now available that can control severe pain for an entire day with just one dose (i.e., Avinza). Once-a-day dosing makes treatment much easier and

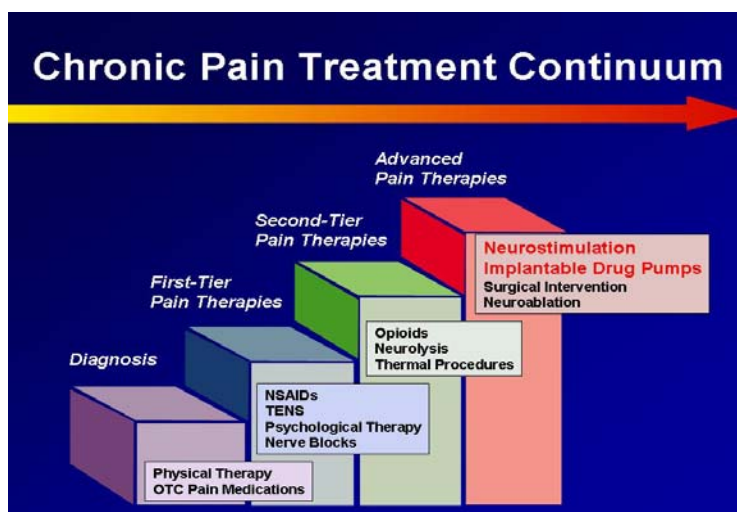
more convenient as well as more cost effective for patients.

Oral transmucosal delivery is available for patients who experience severe pain that is quick in onset and short in duration.

found to be very effective in the treatment of severe migraine headaches. Medications that may be delivered in this manner include Imitrex, Maxalt mlt and Zomig zmt.

When other medications and pain relieving procedures are not effective, a continuous infusion pump can be used. These pumps give a continuous amount of pain medication, neurologic medication, chemotherapy, or muscle spasm medication to any part of the body. The pump can either be outside of the body and carried in a small purse or it may be reduced to the size of a hockey puck and implanted into the abdomen. This method can greatly improve a patient's quality of life.

These new options for the delivery of pain medication are very encouraging. They allow the physician and patient to determine which method is best suited to each patient's needs and lifestyle.



Actiq (fentanyl) is a strong opioid pain medication that is placed in the mouth like a lollipop and is absorbed quickly through the tongue and gums.

Trans mucosal nasal delivery has been

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