

ASCO[®]answers

Managing Cancer-Related Pain

A Guide for Patients, Families, and Caregivers from the American Society of Clinical Oncology



Cancer.Net

Doctor-Approved Patient Information from ASCO[®]

ASCO® Cancer.Net

ABOUT ASCO

Founded in 1964, the American Society of Clinical Oncology, Inc. (ASCO®) is committed to making a world of difference in cancer care. As the world's leading organization of its kind, ASCO represents nearly 45,000 oncology professionals who care for people living with cancer. Through research, education, and promotion of the highest-quality patient care, ASCO works to conquer cancer and create a world where cancer is prevented or cured, and every survivor is healthy.

ASCO furthers its mission through Cancer.Net and Conquer Cancer, the ASCO Foundation.

Cancer.Net (www.cancer.net) brings the expertise and resources of ASCO to people living with cancer and those who care for and about them. All the information and content on Cancer.Net is developed and approved by members of ASCO, making Cancer.Net an up-to-date and trusted resource for cancer information.

Conquer Cancer (www.conquer.org) funds research into every facet of cancer to benefit every patient, everywhere. Conquer Cancer helps turn science into a sigh of relief for patients around the world by supporting groundbreaking research and education across cancer's full continuum.

Learn more at www.ASCO.org. Follow us on Facebook, Twitter, LinkedIn, and YouTube.

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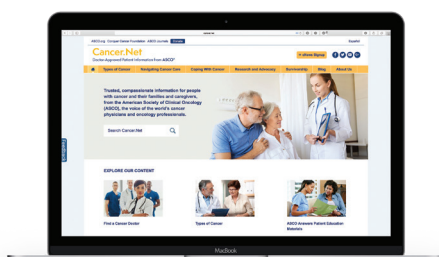
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MANAGING CANCER-RELATED PAIN

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INTRODUCTION

Many people with cancer experience pain during or after treatment. But nearly all cancer-related pain can be managed successfully for most people. Relieving pain—with or without medication—is an important part of overall cancer care.

Just as no two cancers are alike, each patient's experience with pain is different. The goal is to find pain-relief solutions that are acceptable to the patient and the health care provider and that allow for the best possible quality of life. Pain management is most effective when it starts as soon as possible. It should continue through all phases of treatment and into follow-up care.

This booklet is designed to help people diagnosed with cancer, their families, and their caregivers understand the importance of pain relief. It includes different kinds of pain management options and ways patients can communicate their pain clearly to their doctors. You will also find important resources, such as a sample pain-tracking log. With all of the pain-relief options available, there is no reason for anyone to suffer from uncontrolled cancer-related pain. Together, you and your health care team can develop an individualized pain management plan that can help make your diagnosis, treatment, and follow-up care easier and more effective.



UNDERSTANDING CANCER-RELATED PAIN

No matter what type of pain you experience, it is crucial that you tell your doctor, nurse, or another member of your health care team. Preventing pain from developing or getting worse is one of the most effective ways to manage it. Your health care team's role in managing pain is to listen to your concerns and offer safe solutions. This approach is called palliative care or supportive care.



Some people do not want to tell their doctor they are experiencing pain. They may think the pain means that the cancer has worsened or spread. Others feel like pain is simply a part of living with cancer and that they should not complain. Although these thoughts are understandable, there are many reasons pain occurs—and you do not need to suffer from it.

You can play an active role in managing your pain by:

- ▶ Being open with your health care team about your pain
- ▶ Sharing any concerns you have about pain-relief options with the team
- ▶ Letting the team know if your pain gets better or worse
- ▶ Following the suggested treatment plan

Remember, every patient has the right to live with as little pain as possible.

More information about pain and other side effects can be found at www.cancer.net/pain.

The importance of pain relief

It can be difficult to talk about pain. It can be hard to find words to describe unpleasant or overpowering feelings and sensations. But there are several important reasons to tell your health care providers about any pain you have.

In most cases, your health care providers can likely relieve your pain. Finding a solution can help you remain active, sleep better, and improve your appetite. It will also help you enjoy activities and time spent with family and friends.

Pain can make other symptoms or side effects of cancer seem worse or cause new ones. Managing your pain can help you avoid experiencing unnecessary fatigue, depression, anger, worry, or stress.

The pain might tell your health care team something about how the cancer treatment is working. The pain could be a signal that tells your health care providers how to adjust or change your care to make it more effective.

To find the best pain-relief strategies, you need to share your symptoms with your health care team. Also, consider sharing any concerns you may have about the different types of pain-relief strategies available. For example, some people may worry that a specific medicine is addictive or will make them sleepy or groggy. Your health care providers can help you find a pain-relief plan that works for you. That plan might include other methods of pain relief in addition to or in place of medication.

RUDY'S STORY

Rudy, a grandfather of 10, was diagnosed with prostate cancer the year he turned 65. Rudy was not sure if he should tell his doctor or nurse about the pain caused by his treatment. He thought it was a normal side effect and doubted that they could do anything about it. But, the holidays were coming and he wanted to travel to his daughter's house. He did not want his family to see him suffering. He also did not know if he could withstand the long drive. When Rudy realized the pain was affecting his quality of life, he decided to talk with his health care team. His doctor did an evaluation of his pain, called a pain assessment, and then offered several strategies to try to control it. Rudy found relief by wearing a patch on his skin that delivered pain medication. He also found relief through physical therapy, an approach he had not considered until his doctor suggested it. Rudy was thankful that he was able to spend the holidays with his loved ones.

Causes of pain

There are different types of cancer pain. Pain may last just a short time and be triggered by a procedure, treatment, a certain position, or movement. Pain may only occur from time to time. Or, pain may be long-lasting and constant. Pain may also increase suddenly even though it is being treated. This is called "breakthrough pain." Breakthrough pain typically occurs between scheduled doses of pain medicine. It is not always linked to a specific movement or time of day.



A good pain management plan will help relieve pain, no matter what causes it, including:

The tumor. A tumor growing in an organ, such as the liver, may stretch part of the organ. This stretching can cause pain. If a tumor grows and spreads to the bones or other organs, it may put pressure on nerves and damage them, causing pain. Or if a tumor spreads or grows around the spinal cord, it can compress the spinal cord. This eventually leads to severe pain or paralysis if not treated.

Surgery. It is normal to experience pain from cancer surgery. Most pain goes away after a while. But some people may have pain that lasts for months or years. This long-lasting pain can be from permanent damage to the nerves and the development of scar tissue.

Radiation therapy. Pain may develop after radiation therapy, and it may or may not go away on its own. It can also develop months or years after treatment, especially after radiation therapy to some parts of the body, such as the chest or spinal cord.

Chemotherapy. Some chemotherapy can cause pain and numbness in the fingers and toes, called peripheral neuropathy. Usually this pain goes away when treatment is finished. But sometimes the damage is permanent.

Hormonal therapy. Hormonal therapy, or endocrine therapy, may cause muscle and bone pain. This type of treatment can increase a person's risk of osteoporosis and bone fractures, which also cause pain.

Stem cell/bone marrow transplant. Transplantation may cause pain, particularly if the patient develops a serious side effect of this treatment called graft-versus-host disease.

Other causes. People with cancer can have pain from other causes, such as migraine headaches, arthritis, or chronic lower-back pain. The treatment plan your health care team develops with you should address these kinds of pain, because any pain can affect your quality of life.

Diagnosing pain

You know your pain best. So it is important to discuss any new symptoms or a change in symptoms with your doctor or a pain specialist. They can help you find a medication or other pain-relief method that works for you.



To help your doctor better understand your pain, he or she may ask the following questions:

- ▶ Where does it hurt?
- ▶ When does the pain start and stop?
- ▶ How long has the pain been there?
- ▶ How much pain are you having on a scale of 0 to 10?
- ▶ What does the pain feel like, in your own words? For example, is it burning, stabbing, throbbing, or aching?
- ▶ What makes the pain better or worse?
- ▶ Is your pain affecting your ability to work, sleep, eat, do household chores, socialize, or perform other everyday actions?

Talking about how the pain affects you is important because it puts a face on the pain. This gives health care providers a sense of what it's like to live with that pain.

For information on how to talk about your pain with members of the health care team, read "Communicating With Your Health Care Team" on page 21.

Types of pain-relief strategies

After thoroughly evaluating your pain, your doctor will work with you to develop a pain-relief plan. This may also be called a pain management or pain treatment plan. Some hospitals have pain specialists and palliative care specialists available. These experts focus on treating the physical and emotional side effects of cancer. They help patients who have pain that is hard to control.

Your health care team can treat or manage cancer-related pain in different ways:

Treat the source of the pain. For example, a tumor putting pressure on nerves can cause pain. Removing the tumor with surgery or shrinking it with radiation therapy, chemotherapy, steroids, or other medications could reduce or eliminate the pain.

Change the perception of pain. Some medications change how your body feels pain, making it hurt less.

Interfere with pain signals sent to the brain. If medication does not work, your doctor may need to refer you to a pain specialist for specialized medical procedures. These include spinal treatments or pain medication injected into a nerve or tissue surrounding a nerve to interfere with a pain signal.



Different strategies take different amounts of time to work. Some, like pain medications, can work within a matter of minutes to a couple of days. Other medications, like antidepressants and medications used to prevent seizures, may take a couple of weeks to be effective. Still others, such as radiation therapy or chemotherapy, can take weeks to work. Ask your health care providers when you can expect relief and how long you should expect the treatments to be effective.



JEAN'S STORY

Jean was diagnosed at age 30 with stage III invasive breast cancer. She had a bilateral mastectomy with implant reconstruction, chemotherapy, and radiation therapy. At age 40, her cancer came back. A small tumor formed between her skin and implant. During treatment, she had acute pain caused by small fractures in her ribs. Her oncologist prescribed medication to relieve the pain. After several weeks and three separate medications, Jean still suffered.

Concerned by Jean's continued discomfort, her doctor referred her to a pain specialist in the palliative care unit at the center where Jean was being treated. After reviewing Jean's medical file and talking with her about her pain, the specialist recommended an outpatient procedure that would be performed by an interventional radiologist. After the procedure, Jean's pain finally went away and she was able to return to her normal activities. "Living with severe, ongoing pain can be debilitating," Jean said. "Normal, everyday activities are anything but normal when you feel constant discomfort. Thankfully, I was able to put this behind me with the help of my doctor and move on with my life."

MANAGING PAIN WITH MEDICATION

Medication is an option for pain management. There are many different types of medication that may be recommended based on whether your pain is mild, moderate, or severe and based on the cause of your pain. In some cases, you may be prescribed more than one pain medication.

One of the best ways to treat cancer-related pain is to prevent pain from developing or getting worse. When using medication to treat pain, people usually receive it at regular, scheduled times. It is important to take medications regularly because it maintains a steady level of medicine in the body. This is the most effective way to relieve pain.



Doctors also use “rescue” or extra doses to help control breakthrough pain if it occurs. Your doctor will look at the amount of medicine used for breakthrough pain at every visit and adjust your usual dose if needed. Breakthrough pain is pain that suddenly increases, even though it is being treated.

Types of pain medication

Many different pain-relief medications, called analgesics, are available. Depending on the drug and a person’s condition, doctors give them in different ways. Some are taken by mouth, while others are injected into a vein or worn as a skin patch.

Non-opioid pain relievers. These may be options for mild or moderate pain. Doctors sometimes prescribe them along with other pain medicines for severe pain. These include:

- ▶ Non-steroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen (such as Advil and Motrin)
- ▶ Acetaminophen (such as Tylenol)

Medications commonly used for other conditions. Some medications used for other health conditions may help relieve pain, particularly nerve pain. These include:

- ▶ Some antidepressants, such as duloxetine (Cymbalta)
- ▶ Medications to prevent seizures, such as gabapentin (Gralise, Neurontin) and pregabalin (Lyrica).

Opioids, also called narcotics. These are often taken with non-opioid medications.

Opioids include the following, many of which have multiple brand names:

- ▶ Hydrocodone
- ▶ Fentanyl
- ▶ Hydromorphone (Dilaudid, Exalgo)
- ▶ Methadone
- ▶ Morphine
- ▶ Oxycodone
- ▶ Oxymorphone (Opana)
- ▶ Tramadol (Conzip)
- ▶ Tapentadol (Nucynta)

Medical cannabis (marijuana) or cannabinoids. Several states have approved the use of cannabis and cannabinoids for chronic pain. Currently, there is not enough evidence for ASCO to recommend cannabis as an initial option. However, if it is legal in your state, it may be an option, along with other methods, for unrelieved pain.



Common concerns about pain medication

Some people with cancer worry about becoming addicted to pain medication. This is a valid concern, but it is uncommon. Your cancer care team is trained to carefully monitor people taking pain medication. Your team will also help safely end your pain treatment when you no longer need it. This may need to be done by slowly decreasing your pain medication dose over time.

It is also normal for patients to worry about the side effects of medications. Although some medications, particularly those for moderate or severe pain, can cause side effects such as constipation, nausea, sleepiness, or confusion or hallucinations, not everyone experiences them. In addition, all of these side effects can be treated, so it is not necessary for you to suffer because of them. Discussing any side effects that you are experiencing with your health care team will usually make it possible to continue using your pain medicine.

If you are concerned about a specific side effect, talk with your doctor about whether it is manageable or if there are other pain management options. Also, tell your doctor if a side effect does not go away. Changing the timing, dose, or type of the medication may help.

A NOTE ON OPIOIDS

In recent years, the epidemic of people dying from opioid addiction and overdose has become a major concern. This has led to national efforts in the United States to limit opioid prescriptions, including general recommendations from the Center for Disease Control and Prevention (CDC) on when opioids should be used for chronic pain. However, the CDC has clarified that these recommendations do not apply to people receiving cancer care.

Doctors may consider prescribing opioids to some people with cancer when other options have not worked. There is a risk of abuse by the patient or those close to him or her. Because of this, doctors will likely ask about these potential risks. It is very important that patients and caregivers store opioids securely so other people cannot get them. If someone uses them without a medical reason, serious side effects and even overdose can happen. If you do not use all of a medication for any reason, dispose of it in a safe manner. To learn how, read "Storing and Disposing of Medications" on page 15.



Taking pain medication correctly

A doctor, nurse practitioner, or physician assistant writes a prescription for a specific pain medication because they feel it will treat your pain in a specific way. Carefully following the medication instructions will help ensure you get the most benefit from the drug. If medication is not taken according to the instructions, people often experience more side effects and the medication is less effective.

With any new pain medication prescription, remember to:

Create a complete list of all the medications you already take. Include all prescription medications, over-the-counter drugs, and dietary supplements, such as vitamins or herbal supplements. Share and discuss this list with your health care team, including your pharmacist, to ensure that all medications remain effective.

Keep taking the medication as prescribed, even if you do not notice an improvement in your symptoms right away. Many medications take a few weeks to start working. However, if you feel like the medicine is not working, talk with your doctor.

Keep taking the medication as prescribed, even if you notice an improvement in your symptoms right away. Ask your doctor how long you should continue to take it.

Contact your doctor if you start to feel worse while taking a medication. Share any new symptoms you notice.

Talk with your doctor about medication cost concerns that might lead you to lower or skip a dose. Ask about local and national resources for financial help.

Keep the information about the medication that comes with your prescription. This paper describes the drug, its possible side effects, and any potential drug interactions. Before you start a new medication, go over this information with a member of your health care team.

You may also want to consider filling all of your prescriptions at the same pharmacy. By doing this, your pharmacist can keep a complete list of the medications you take and warn you about possible drug interactions. Drug interactions can happen when a medication reacts with another medication or supplement you take. This interaction can cause unexpected side effects, some of which can be very serious, or reduce or increase the medication's strength.

QUESTIONS TO ASK ABOUT PAIN MEDICATION

- ▶ What is this medication used for?
- ▶ How much of the medication will I need to take? How often should I take it?
- ▶ How long will I get pain relief from a dose of the medication you are suggesting?
- ▶ How long will it take before I know how effective this medicine will be?
- ▶ Is there a certain time of day I should take the medication?
- ▶ Do I need to take this medication with food? Or should I take it on an empty stomach?
- ▶ Are there any foods, drinks, supplements, or other drugs that can change the strength or effectiveness of this medication?
- ▶ Can I crush or cut my pills to make them easier to take?
- ▶ How long will I need to take this medication? Are there any reasons why I should stop taking it?
- ▶ What should I do if I miss a dose?
- ▶ What are the most common side effects of this medication? How can they be managed?
- ▶ What should I do if I experience an unexpected side effect of the medication?
- ▶ What follow-up tests will I receive to monitor the medication's effectiveness?
- ▶ If I am worried about managing my medication costs, who can help me?
- ▶ If I have questions or problems, who should I call?



Managing multiple prescriptions

You may be prescribed several medications by different health care providers while you are being treated for cancer. Tracking which medications to take and when, including pain medications, may seem like an overwhelming task. But there are steps you can take to keep you on an effective medication schedule. These tips may help:

- ▶ Read the entire medication label on each container to make sure you take the right dose on the right schedule.
- ▶ Take your pills at the same time every day, such as first thing in the morning or with lunch, unless your health care team gives you other directions.
- ▶ Use a chart, pill calendar, or your phone's calendar reminders to set a schedule and track when you take your medications.
- ▶ Use a weekly pill case so you know whether you have taken each day's medications.
- ▶ Ask family members or friends to remind you.
- ▶ Ask your doctor what to do if you miss or skip a dose of each medication.
- ▶ Ask your pharmacist to use easy-to-read, color-coded labels to make it easier to identify which medications to take and when.

ASCO's patient education website, Cancer.Net, also offers a free mobile app that can help patients and caregivers with keeping medications organized and with questions to ask. Learn more under the section on "Tracking Pain Using a Mobile Device" on page 22.

Storing and disposing of medications

Pain medications are very effective at managing and relieving cancer pain, but they are dangerous if another person or pet accidentally swallows them. It is important to safely and securely store your prescription pain medication, particularly opioids.

Store your pain medication in a bottle that has a child-resistant lid. You should also keep all of your opioid medication in a location where no one, not even a pet, can easily see it or get to it. Do not store your pain medication in many different places around the house or leave it sitting out. Only share details about your prescription(s) with your caregiver and others who need to know.

Once your pain treatment is complete, talk with your doctor, nurse, or pharmacist about how you should safely dispose of leftover pain medication. The U.S. Food and Drug Administration (FDA) recommends that some opioid medications be flushed down the toilet. However, some communities have rules and restrictions against this. Another option is to take any unused or expired drugs to a prescription medication take-back program collection site. Permanent collection boxes can be found in many communities and pharmacies. See the “Medication Disposal Resources” box on page 16 to learn more.

Some pharmacies offer packets that are designed to make medications safe for disposal. With these packets, you insert your medications and add a small amount of water. A chemical reaction in the packet destroys the medication. You can then seal the packet and throw it away in the trash.



If you cannot take your medication to a collection site or flush it, you may need to put it in the trash. To do this safely, take these steps:

1. Take all of the medication out of its container and put it in a sealable plastic bag or coffee can.
2. Mix the medication with an undesirable substance, such as cat litter or used coffee grounds.
3. Seal the container. Be sure to put it in the trash, not the recycling bin.



If your doctor prescribes a fentanyl skin patch, make sure that used patches are kept away from others. According to the FDA, too much fentanyl can cause severe breathing problems and even death in babies, children, pets, and adults. Even after you have used a patch for several days, there is still fentanyl in the patch, and it can be enough to cause serious problems for others. After using a patch, fold it in half so the sticky parts are sealed together and use one of the disposal methods described above.

Ask your doctor what you should do if a pet or family member accidentally comes in contact with your medication. Some doctors will give you a prescription for a medication called naloxone, which can be used to rescue someone who is accidentally exposed to opioids.

MEDICATION DISPOSAL RESOURCES

Drug Enforcement Administration Drug Disposal

www.DEATakeBack.com
800-882-9539

MedReturn Drug Collection Unit

www.medreturn.com
877-218-0990

National Association of Boards of Pharmacy: Drug Disposal Locator

www.safe.pharmacy

OTHER WAYS TO MANAGE PAIN

Medication often plays an important role in relieving cancer-related pain. There are also several medication-free self-care and support options you can explore.

These therapies use different techniques and methods to help ease the discomfort of many physical symptoms. They may also help reduce stress, depression, and anxiety to help you cope with cancer.

You may find that using more than one self-care or support method helps relieve your pain. Some people also find that a pain treatment plan that combines some of these methods with medication works best for them and may let them use less medication to relieve pain.

Self-care methods

Self-care methods are things you can do on your own. In some cases, you may find that learning certain techniques from a specialist and then continuing them at home may help you use them more effectively. Talk with your doctor before trying methods that have not been recommended by your health care team.

Breathing exercises/meditation.

Gentle breathing exercises can decrease pain. They can also help you relax and reduce tension. You can do them while sitting in a chair and relaxing your arms gently at your side. Or you can do them while reclining in a chair or lying down on a bed. Try breathing in through your nose while you slowly count to 3 in your head. Then breathe out through your mouth, once again counting silently to 3. Continue for 5 minutes at a time at first, gradually working up to 20 minutes. You can also meditate.

Meditation exercises may involve softly repeating a calming word. Or you might imagine breathing heat, coolness, or a feeling of relaxation in and out of painful areas.



Distraction. Certain activities can distract your mind from pain, including:

- ▶ Taking a warm bath
- ▶ Reading a book
- ▶ Watching TV or a movie
- ▶ Drawing or painting
- ▶ Doing needlework, such as sewing or knitting
- ▶ Listening to music
- ▶ Taking a short walk outdoors

Heat and cold. Apply hot or cold compresses, heating pads, or ice packs to aching, sore, or painful areas of the body. This will help to decrease discomfort. Wrap ice packs and compresses in a towel to protect the skin. And use heating pads over clothing, a sheet, or a towel. Try different temperatures to find a method that provides relief. Talk with your health care team about this approach. Follow any special instructions, particularly during or after radiation therapy or chemotherapy. Start by applying heat or cold for 5 to 10 minutes at a moderate temperature. Do not apply heat or cold directly to bare or injured skin, areas that are numb or sensitive, and areas that have had recent radiation therapy.



Imagery and visualization. Many imagery techniques are useful for pain and discomfort from treatment. For example, with the “magic glove” technique, you imagine putting on a glove before getting a needle stick in your hand. Then you visualize that the glove protects your hand from the feeling of pain. Or you may benefit from imagining a peaceful scene, replaying a favorite memory, or creating a mental picture of healing light taking the pain away. A trained therapist can teach you different exercises to do on your own.

Support methods

In addition to methods you can do on your own, there are methods that require you to work with a licensed or certified specialist.

Acupuncture. This ancient form of Chinese medicine involves inserting special needles into specific areas of the body. Some research has shown that it can relieve cancer-related pain. Make sure to see an experienced practitioner who only uses sterile needles.

Biofeedback. This technique helps you control your body's functions, such as your heart rate. Painless sensors are placed on your skin to gather information about the body's processes. A trained biofeedback therapist uses this information to help you focus on making small changes to your body. These changes may include relaxing certain muscles to reduce pain.

Counseling and support groups. Talk with a trained counselor or attend a cancer support group. This will help you to learn about pain management techniques that have worked for others. Getting this support may also relieve some physical and emotional tension that often makes pain worse.



Massage. A massage therapist who has experience working with people with cancer can provide gentle therapeutic massage. This may help relieve tension, discomfort, and pain. A caregiver can do simple massage techniques at home, including gentle, smooth, circular rubbing of the feet, hands, or back. You can also massage yourself by applying light, even pressure to your hands, arms, neck, and forehead.

Nutritional support. Cancer and cancer treatments sometimes cause mouth sores or nausea. These side effects make it hard to maintain proper nutrition. Not getting enough nutrients from food can cause pain or discomfort. A dietitian (a food and nutrition professional) or your doctor may recommend that you take supplements or change your diet to reduce these side effects.



Physical therapy or occupational therapy. A physical therapist treats nerve, muscle, and fitness problems that make it difficult for a person to function well on a daily basis. He or she can teach you how to relieve pain using simple exercises or devices. This includes artificial body parts, splints, or braces.

An occupational therapist helps people prevent and live with illness, injury, and disability. For example, an occupational therapist may help someone avoid lymphedema after cancer surgery. Lymphedema is a painful buildup of fluid caused when lymph nodes are removed. You may also want to see a certified lymphedema therapist (CLT). A CLT is a health professional who specializes in managing lymphedema.

Integrative medicine is a combination of medical treatments for cancer and complementary therapies to cope with symptoms and side effects, such as pain. It includes treatments like acupuncture, massage, physical therapy, and more. For more information about integrative medicine, visit www.cancer.net/integrative.

COMMUNICATING WITH YOUR HEALTH CARE TEAM

Once your doctor diagnoses your pain and you have started your pain management plan, maintaining open and honest communication is a very important part of your care. Research shows that people who have good communication with their doctor tend to be more satisfied with the care they receive.



The most important thing you can do to manage your pain is to keep the members of your health care team informed about how treatment is working. Tell a member of the health care team if your pain is not being relieved. The doctor can help figure out why it is not working and find an option that works better for you.

The type, intensity, and location of pain is different for everyone. But consistent teamwork between you and your health care team can help you find an effective solution.

BARBARA'S STORY

Barbara is a 55-year-old working mother of three and an avid runner. After a routine chest x-ray, followed by additional tests, she was diagnosed with lung cancer. She told her doctors and nurses that she was very worried about the side effects of chemotherapy. It was important to Barbara to try to maintain as much of a normal routine as possible, despite her aggressive cancer treatment plan. When she started experiencing joint and muscle pain, Barbara shared her symptoms with her doctor. Her pain started the moment she got out of bed each morning and continued throughout the day. She worried that she might not be able to finish chemotherapy. She also worried that the pain was due to her cancer, rather than a side effect of her treatment. Barbara's doctor assured her that her pain was treatment-related and that there were ways to manage her discomfort. "My doctor alleviated my fears and we found a medication that worked for me. I was not able to run during my treatment, but I managed to finish my chemotherapy. Plus, I was able to keep up with my busy family."

How pain tracking helps

Track the results of your pain management techniques to find out which ones work best for you. You can do this by using a pain chart, pain log, or pain diary. Tracking your pain, even for a few days, sometimes can reveal patterns in the pain that can be used to improve pain control.

Helpful information to track includes:

- ▶ The date and time you experience the pain and how long it lasted.
- ▶ What activities you were doing when the pain started.
- ▶ Where in your body the pain started and if it was specific to one area or moved to other parts of the body.
- ▶ The intensity of the pain from 0 to 10, with 10 being the highest level of pain.
- ▶ How the pain felt, such as burning, stabbing, aching, or throbbing.
- ▶ The pain control methods you tried and how effectively they worked. Include any methods you are using that might not have been prescribed or recommended by your health care team.
- ▶ Information about pain caused by other health conditions you may have, such as diabetes or arthritis.



There is a sample pain tracking chart on pages 26 and 27 of this booklet. You can also make your own paper chart or ask your doctor for a chart. Another option is to search the internet for “pain management chart” or “pain tracking chart” and several options will appear. You can save the chart you prefer to your computer and print it out.

TRACKING PAIN USING A MOBILE DEVICE

Cancer.Net Mobile, a free app for iOS (iPhone, iPad) and Android, features a symptom tracker that allows you to record the time and severity of symptoms and side effects, such as pain. An interactive tool also lets you keep track of your questions to ask health care providers and record voice answers. In addition, there's a place to save information about prescription medications. To learn more about Cancer.Net Mobile, visit www.cancer.net/app.

RESOURCES

You can find additional information about pain management and links to patient support and resource organizations on Cancer.Net (www.cancer.net). The following national organizations also provide resources about the topics addressed in this booklet.

American Academy of Hospice and Palliative Medicine

www.palliativedoctors.org

American Cancer Society

www.cancer.org

800-227-2345

CancerCare

www.cancercares.org

800-813-4673

Cancer Support Community

www.cancersupportcommunity.org

888-793-9355

Caregiver Action Network

www.caregiveraction.org

202-454-3970

Center to Advance Palliative Care

www.getpalliativecare.org

International Association for Hospice & Palliative Care

www.hospicecare.com

866-374-2472

National Cancer Institute

www.cancer.gov

800-422-6237

National Hospice and Palliative Care Organization

www.caringinfo.org

703-837-1500

Programs and services continually change, so visit www.cancer.net/support to find the most current information.

LOCAL RESOURCES

DICTIONARY

Acupuncture: The use of very tiny needles and pressure to stimulate points on the body.

Addiction: A chronic disease characterized by seeking out drugs and using them that is difficult to control even though a person knows that the behavior can harm them.

Analgesics: Medications that relieve pain.

Antidepressants: Medications that treat depression.

Biofeedback: A method in which painless sensors are placed on a person's skin to gather information about the body's processes.

Breakthrough pain: Pain that increases suddenly even though it is being treated.

Chemotherapy: The use of drugs to destroy cancer cells.

Dose: The amount of a medication that a person should take at one time.

Drug interactions: Unexpected side effects that occur when a medication reacts with another medication.

Hormonal therapy: Treatment that removes, blocks, or adds hormones to destroy or slow the growth of cancer cells. Also called hormone therapy or endocrine therapy.

Integrative medicine: A combination of medical treatments to treat cancer and complementary therapies to manage the patient's symptoms and side effects.

Lymphedema: A painful buildup of fluid caused when lymph nodes are removed. Lymphedema causes swelling, often in an arm or a leg.

Medical cannabis: Marijuana that is approved for medical use.

Medication take-back program: A program that collects unused or expired prescription medicines.

Meditation: A way for a person to learn to focus attention to calm the mind and relax the body.

Non-opioid pain relievers: Pain relievers such as non-steroidal anti-inflammatory drugs (ibuprofen and others) and acetaminophen that are prescribed for mild or moderate pain.

Oncologist: A doctor who treats cancer.

Opioid pain relievers: Pain relievers used to treat moderate to severe pain that work by attaching to specific proteins called opioid receptors. Also called narcotics.

Over-the-counter drugs: Medications that you can buy without a prescription from a health care provider.

Pain assessment: A way for the health care team to determine a person's level of pain and to help guide decisions about how to treat it. There are a number of tools used to do a pain assessment. The assessment may measure the pain's frequency, severity, location, causes, and more.

Pain management plan: A personalized plan that the doctor recommends to help relieve pain.

Pain tracking log: A chart or journal that a person uses to track pain and the results of pain management techniques.

Pharmacist: A health care professional who dispenses medications.

Quality of life: An overall sense of well-being and the level of satisfaction with life.

Radiation therapy: The use of high-energy x-rays or other particles to destroy cancer cells.

Rescue doses: Extra doses of pain medicine prescribed by a doctor to control breakthrough pain.

Side effect: An undesirable result of treatment, such as pain, fatigue, nausea, vomiting, or hair loss.

Stem cell/bone marrow transplant: A type of cancer treatment in which a patient receives new stem cells to replace the body's bone marrow.

Supportive care: Any form of treatment that concentrates on reducing a patient's symptoms or treatment-related side effects, improving quality of life, and supporting patients and their families. Also called palliative care or symptom management.

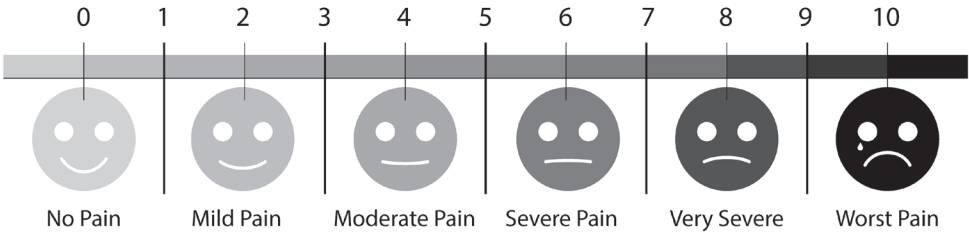
Surgery: The removal of cancerous tissue from the body through an operation.

Tumor: A mass that forms when healthy cells change and grow out of control. A tumor can be cancerous or benign. A cancerous tumor is malignant, meaning it can spread to other parts of the body. A benign tumor means the tumor can grow but will not spread.

SAMPLE PAIN TRACKER

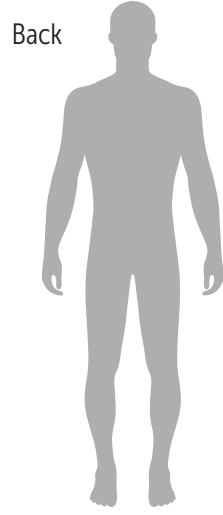
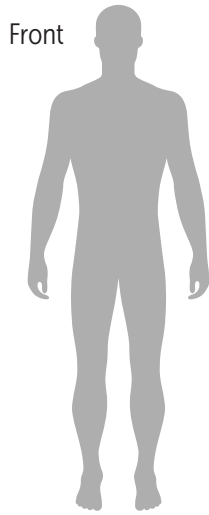
PAIN SCALE CHART

Use the pain scale chart to determine your pain score below.



Date	Time	Pain score	How does the pain feel? <i>(aching, sharp, shooting, throbbing, etc.)</i>
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	
		0 1 2 3 4 5 6 7 8 9 10	

Put an **X** on the parts of your body where you feel pain and the time when the pain happened.



What were you doing when the pain started?	What did you do to relieve the pain?	How long did the pain last?

Looking for Other Patient Information Resources?

ASCO ANSWERS GUIDES

ASCO Answers Guides feature comprehensive information about the diagnosis, treatment, side effects, and psychosocial effects of a specific cancer type, as well as practical information for patients and families. Guides on survivorship and caregiving are also available.

ASCO ANSWERS FACT SHEETS

ASCO Answers Fact Sheets provide a one-page (front and back) introduction to a specific type of cancer or cancer-related topic. Each includes an overview, illustration, words to know, and questions to ask the health care team. Cancer.Net has more than 65 fact sheets available (including some in Spanish), covering different cancer types, diagnosis and treatment, and side effects.

ASCO ANSWERS BOOKLETS

ASCO Answers Booklets provide in-depth, practical guidance on specific topics in cancer care, including advanced cancer care planning, pain, cost of care, managing weight, palliative care, and stopping tobacco use.

For Patients and Caregivers: If you are interested in additional educational materials, visit www.cancer.net/ascoanswers to find all of our available materials in electronic format.

For Oncology Professionals: Bulk quantities of high-quality print materials are available for purchase. Visit www.cancer.net/estore or call 1-888-273-3508 to place your order.

To request free promotional materials for your practice, please send an email to contactus@cancer.net.

Cancer.Net

Doctor-Approved Patient Information from ASCO®

WE WANT TO HEAR FROM YOU

If you found this material helpful or if you have comments or suggestions about how it could be better, please let us know at contactus@cancer.net.



AMERICAN SOCIETY OF CLINICAL ONCOLOGY

AMERICAN SOCIETY OF CLINICAL ONCOLOGY

2318 Mill Road, Suite 800

Alexandria, VA 22314

Phone: 571-483-1300

Fax: 571 366-9530

www.asco.org | www.cancer.net

For more information about ASCO's patient information resources,
call toll-free 888-651 3038 or e-mail contactus@cancer.net.

To order more copies of this booklet,
call 888-273-3508 or visit www.cancer.net/estore.

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