

癌症疼痛治疗： 原理与实践

Cancer Pain Management: Principles and Practice

主编

Winston C.V. Parris

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谨献给使我的生活充满爱、目标及欢乐的女士们：

我已故的妻子 Shirley V. Parris, 我已故的母亲
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序 I

《癌症疼痛治疗:原理与实践》这本书是癌痛治疗史上一个里程碑,专门论述由癌症引起的反复无常的疼痛。虽然疼痛是人类最古老的苦恼,但它一直是最常见的求医原因。持续的疼痛和高质量的生活是不相容的。直到 19 世纪,我们才有能力应用全身麻醉来控制疼痛。本书编者是学麻醉出身的,许多参编者也都是麻醉界同行。

对癌痛治疗不够的普通性,促进了这本书的及时出版。癌痛不正当疗法使医生治疗癌痛的信心受挫,并对患者及家属产生难以形容的痛苦。那些信奉本书宗旨的医生能够减轻癌症患者的痛苦。

这本书非常全面,也确实应该全面,因为癌痛涉及到许多医学学科。针对这一问题,作者及其编著者承受巨大挑战编写本书。面对挑战,他们很尽职地向前迈出了一步,并编写了一部高质量的作品。

本书共 48 章,61 位编著者。本书文笔流畅,从癌痛的历史背景和癌痛的病因机制入手,以最新数据描述了当代成人、儿童疼痛的流行病学情况,对已有的和新的癌痛控制方法进行了讨论。包括阿片制剂缓释控制,鞘内、硬膜外使用阿片制剂,神经阻滞治疗,介入技术治疗疼痛,神经封闭止痛,趋痛技术,吗啡,有创止痛技术和神经松解术。

本书一个有共识的特点就是致力于癌症患者的心理需要,讨论了无医关照和医院外救助的作用。并对护士、社会工作者、营养师及其他人员的作用也做了论述。此外,患者的组织机构活动和支持者也一一列出。

本书的最后一章体现了作者及编著者的同情心和性格特点。一些章节还讲述了精神与痛苦、伦理问题和政府对癌痛管理的指导。

由于癌症及其有关的疼痛影响所有医学原则,因此本书的编写是复杂的。不过 Winston C. V. Parris 博士以及他的编著者们无畏地应对挑战,并完成了有意义的高质量的作品。所有治疗癌痛的健康医学机构应当感谢这样的杰作。

Henry W. Foster, Jr.

序 II

几乎没有什么问题能比减轻癌痛者的疼痛更富有挑战性的了。癌症在发病时或其早期很少疼痛。然而伴有癌转移的患者通常产生逐渐加重的疼痛,这取决于转移癌发生的部位,直至发展为无情的痛苦折磨。此外,对一些患者采用的治疗也会直接或间接地带来严重的疼痛。最近,John J. Bonica 估计,中期癌症 40% 以及晚期癌症 60%~80% 的患者都经受着中等至严重的癌痛。

大量的癌症患者获得满意的镇痛效果是由于合理地选用了阿片制剂。越来越多的医生认为癌症患者临终几周应尽可能免受疼痛,并在患者需要时随时提供如吗啡之类的药物。新的给药体系近十年已经发展起来,如,缓释吗啡胶囊,自控给药和皮下储药器能传送稳定的吗啡供应人体。这些技术的大多数是我们对癌症患者使用麻醉剂的认识转变的结果。姑息治疗服务机构越来越多,以致临终患者能在无痛和没有其他痛苦的情况下度过他的最后岁月。

80%~90% 的癌症患者通过适量应用阿片制剂获得无痛和高质量生活,有的时候需联合应用非甾类消炎药和镇静剂。这些治疗最好在医院临终关怀部门完成,但仔细的临床观察和剂量的调整可由任何医疗服务机构执行,以调整到患者一般能忍受的最小疼痛水平。

然而,有时癌的出现是无规律的,以致阿片制剂不很合适。在另外的一些情况下,癌痛非常剧烈,而阿片制剂不是非常有效。周期性的复发痛即使在使用吗啡的情况下也会一天发生一次或多次,每次持续几分钟或几小时。这些复发痛,由于可达到意想不到的严重程度而成为医疗的最大难题。

癌痛的治疗需要通过许多途径或手段,有幸的是 Parris 博士在这里给我们提供了极好的章节来描述大批可供应用的技术。他邀请这一领域的一些专家,提供了各种各样治疗癌痛的技术。这些章节描述了应用麻醉、药物、精神、外科和其他方法处理癌痛的技术。对不同癌痛治疗技术的优缺点进行了客观的评价,以至患者能做出明智的选择。除了这些阻止疼痛的技术方法之外,Parris 博士还邀请了能处理诸如自杀、药物滥用以及政府制定规章的机构和伦理问题等问题的著名专家编写本书。

编著者对本书的贡献闪耀着其对所有遭受痛苦折磨者怜悯之情。这种对人类的怜悯和关怀是 Parris 博士个人品质光芒四射的表现,并为他的编著者们提供了一束这样的光芒。毕竟他们的关心和所能提供的是用他们的专业知识来帮助遭受痛苦的病人。这是一部杰出的作品,他提供了治疗的指导、技术、灵敏性和复杂问题的讨论,以及癌痛患者所提出的富有挑战性的问题。Parris 博士在通过谋取知识权威帮助与本书读者分享他们的经验方面做出了很有价值的贡献。癌痛和痛苦的缓解是生命的崇高目标,本书能使全世界的医疗达到这一目标。

Ronald Melzack