

HANDBOOK OF CRITICAL CARE PAIN MANAGEMENT

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*Dedicated to those we care for and about
—patients, friends, and family—
who suffer as we struggle to truly understand pain.*

*And to the lights of my life,
John, Laura, and Jamie,
for their humor, courage, patience, and love.
rjh*

This book is printed on acid-free paper.

HANDBOOK OF CRITICAL CARE PAIN MANAGEMENT

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PREFACE

Pain is a universal experience of the human condition and is the complaint that most frequently prompts patients to see physicians. The diagnostic process that leads to a therapeutic plan depends upon more than data gleaned from this history and physical examination. The behavioral interaction between the patient and the health-care professional reveals significant information regarding the patient's level of distress *and* the unique meaning that the pain experience has for that particular person.

A vital source of discriminatory information regarding the pain is lost when the health-care professional's interaction with the patient is compromised, whether because of acute injury, critical illness, cognitive deficits, or the extremes of age. The caretaker must then rely more on the clinical findings, diagnostic tests, and his or her experience in assessing the pain. The "incomplete" data base that this affords is often frustrating and disquieting to the practitioner. In addition, the critically ill patient often has a long problem list, headed by life-threatening conditions. In this situation, the significance of pain pales when compared with hypoxia or hemorrhage. Review of most of the major critical care texts supports this philosophy, as there is little attention given to pain management in this patient population while life-maintaining therapy is provided.

Our contemporary understanding of pain has been generated by intriguing anatomic, neuropharmacologic, and physiologic discoveries, an appreciation of the impact of the neuroendocrine response to stress, as well as an awareness of the detrimental effect that pain and stress have on coagulation and immunocompetence. This broadened knowledge elevates pain from its designation as an unfortunate inconvenience to the realistic status of a significant factor with the potential to affect the morbidity and mortality of patients in the particularly tenuous circumstances of critical illness. The *Handbook of Critical Care Pain Management* was conceived in an attempt

to raise our collective level of consciousness with regard to the importance of pain *and* the benefits of effective pain management in these high-risk patients. The primary pain texts are aimed at practitioners who have received some formal training in pain management. This handbook, on the other hand, is intended as a ready source of information for practitioners in many health-care disciplines who may well lack extensive experience with pain medicine. By providing basic information about pain management in a simple, easily accessible format, it is our hope that the *Handbook* will help health-care professionals (with little or no formal training in the specialty) to develop a respect for the potential adverse effects of inadequately treated pain and, at the same time, that it will proffer additional tools and strategies with which to assess and manage pain.

Acute pain in the face of critical illness or injury requires decisive action. With this in mind, we chose a succinct outline format with key ideas highlighted for quick reference. Multiple tables and the appendix of common drugs further enhance the ready access to information. The book addresses the essentials of assessment of patients with acute pain and critical illness and reviews sedative and analgesic pharmacology. An overview of analgesic techniques and modalities is provided in order to facilitate an understanding of the indications, contraindications, and complications associated with the various treatment options. In the system-by-system clinical problems section, we discuss pain syndromes specific to each organ system as well as how dysfunction of that system influences pain management choices. This section also includes case presentations and pertinent discussions to enhance the clinical relevance of the commentary. Finally, several special concerns, including terminal care, tolerance and addiction, and analgesia in pediatric and obstetrical ICU patients, are addressed in order to provide information across the spectrum of critically ill patients. The vital issues specific to nursing care are also presented. A chapter that briefly reviews common chronic pain syndromes is provided to expand the practitioner's understanding of preexisting painful conditions that may still be of concern *to the patient* despite the presence of a critical illness.

Pain is often underrecognized. Even when appreciated, pain is frequently undertreated because of our fears, prejudices, and the perception that we have a limited armamentarium. It is our hope that the *Handbook of Critical Care Pain Management* will be practical and useful for many practitioners, including intensivists, surgeons, emergency physicians, internists, physicians in training, and nursing personnel. By providing core information about assessment and treatment, the *Handbook* will allow health-care providers to feel better equipped to provide *complete care* to their patients, gain greater satisfaction in dealing with these patients, and reduce morbidity and mortality.

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PART
ONE

INTRODUCTION

