

Improving Treatment of Chronic Pain

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CME Test Questions

Case # 1: Hannah, a 52-year-old woman, presents to your office for an initial visit. She reports that following “some sort of viral illness” 2 years prior, she developed intractable pain and fatigue that have persisted. Hannah has been to several physicians in the past year. “One of them made me feel like all this is just in my head,” she says. Hannah had been taking ibuprofen, but stopped recently as it had done little to relieve her symptoms. She takes no other medications. She reports feeling depressed and losing interest in activities she used to enjoy. Due to chronic pain, Hannah recently left her job as a daycare provider. “Taking care of kids was one of the joys of my life, and I can’t even do that anymore because I hurt so much and am so tired all the time,” she says. Family history is negative and social history reveals no substance use or history of personal abuse. Physical examination is notable for multiple points of tenderness to palpation in the neck, shoulders, chest wall, back, hips, and knees. Pain is most prominent at points along her lower back. Joint exam and neurologic exam are normal. Laboratory studies are also unremarkable.

1. Which of the following would be a characteristic component of your full assessment of this patient? (select only one)
 - a) Questions and discussion that are limited to issues relating directly to the patient’s chronic pain
 - b) A comprehensive intake form that may take the patient up to 2 hours to complete
 - c) A questionnaire that avoids pictures of the body, which may prompt the patient to exaggerate the extent of her pain
 - d) Radiographic evaluation that should include magnetic resonance imaging (MRI) of the lumbar spine.

Case #1 continued: Based on your complete assessment, you diagnose Hannah with fibromyalgia.

2. How would you best categorize this patient's pain? (select only one)
- a) Nociceptive
 - b) Neuropathic
 - c) Psychogenic
 - d) Mixed
3. Which of the following initial pharmacologic therapies would you consider for this patient? (select only one)
- a) A serotonin norepinephrine reuptake inhibitor (SNRI)
 - b) An anticonvulsant
 - c) A selective serotonin reuptake inhibitor (SSRI)
 - d) A nonsteroidal anti-inflammatory drug (NSAID)

Case #1 continued: "I'll try a pill if you think it will help," Hannah says. "Is there anything else I can do?"

4. Which of the following would you tell this patient regarding non-pharmacologic therapies for her chronic pain? (select only one)
- a) Such therapies are reasonable to consider if medications do not provide adequate relief
 - b) Interpersonal psychotherapy has been shown to be effective in patients with chronic pain
 - c) Physical therapy has not shown significant benefit in patients with chronic pain
 - d) Massage therapy has not shown significant benefit in patients with chronic pain

Case #1 continued: You conclude the visit and let Hannah know you would like to see her in follow-up.

5. During the follow-up visit, which of the following would you do to facilitate communication with this patient? (select only one)
- a) Avoid focusing on surrogate measures of pain
 - b) Avoid suggesting words to the patient to help describe her pain, as such suggestions do not facilitate open-ended questions
 - c) Consider the possibility that the patient may hesitate to admit her pain is improved for fear of having her pain medications discontinued
 - d) Rather than scheduling the next visit, encourage the patient to call for her next follow-up appointment when she feels she needs repeat assessment

Case #2: James, a 63-year-old man with a history of type 2 diabetes, presents with complaints of burning and tingling in his feet and hands for the preceding year. Symptoms have been progressively worsening. “The pain is really keeping me up at night. Some nights I just can’t get to sleep.” Medications include metformin and insulin glargine. James was previously taking amitriptyline, but this was discontinued after he developed urinary retention. Physical examination shows decreased sensation to pin prick testing in both legs extending to the level of the ankles. Hemoglobin A1c is 9.7%. Based on your findings, you diagnose James with diabetic neuropathy.

6. Which of the following is characteristic of the pathophysiology of this patient’s chronic pain? (select only one)
 - a) Somatization
 - b) Increased cholinergic activity in the brain and spinal cord
 - c) Increased dopaminergic activity in the brain and spinal cord
 - d) Central sensitization

7. Which of the following pharmacologic therapies would you initially select for this patient? (select only one)
 - a) An anticonvulsant
 - b) An SSRI
 - c) A centrally-acting agent with μ -opioid receptor agonist and dopamine reuptake inhibitor properties
 - d) A tricyclic antidepressant

8. Based on recent research, which of the following is characteristic of antidepressants used in the management of chronic pain? (select only one)
 - a) By addressing symptoms of depression, these medications secondarily relieve subjective pain
 - b) Through action at specific receptors, they promote central sensitization
 - c) They are not effective in management of neuropathic pain
 - d) They have anti-nociceptive effects that decrease mixed pain

9. Which of the following is characteristic of anticonvulsants used in the management of chronic pain? (select only one)
 - a) Mechanism of action includes binding to the $\alpha 2\delta$ subunits of calcium channels in the central nervous system
 - b) Their effects on pain pathways are not independent of psychotropic effects
 - c) Their effects on pain are not synergistic with antidepressants

- d) Mechanism of action includes binding to the 5-HT₃ serotonin receptors in the central nervous system

CME Evaluation

Improving Treatment of Chronic Pain

1. In your experience, which of the following is the most significant barrier to the optimal management of chronic pain? (select only one)
 - Complexity of patients' chronic pain syndromes
 - Lack of adequate effective treatment options
 - Side effects of treatment and/or potential for drug-drug interactions
 - Difficulty in effective communication with patients who have chronic pain
 - Lack of patient adherence to treatment
 - Difficulty in accurately diagnosing chronic pain

2. Approximately how many patients do you see each week? _____/per week

3. Approximately what percentage of your patients has chronic pain? _____%

4. What year did you graduate from medical school?

5. Did you attend medical school in the United States?
 - Yes No

6. Are you:
 - Male Female

7. Degree:
 - MD/DO
 - PA
 - NP
 - Other _____

8. Physician Specialty:
 - Internal Medicine
 - Family Medicine
 - Other _____

9. Practice Location:
 - Urban

Suburban

Rural

10. Present Employment:

Solo Practice

Group Practice

Medical School

HMO

Non-Government Hospital

Government

Other _____

11. Major Professional Activity:

Direct Patient Care Activities

Administrative Activities

Medical Education

Medical Research

Other _____

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