Pain Management Review

Pain in the Pediatric Patient - Rosalie F. Tassone, MD, MPH and Stephen Robert Hays, MD
Identify pediatric patients at highest risk of developing chronic postoperative pain; Use a multimodal approach to manage postoperative pain; Cite evidence supporting the use of conventional analgesic agents in children; Consider the use of co-analgesics such as gabapentin and pregabalin; and Evaluate evidence on the safety and efficacy of nonopioid analgesics for management of perioperative pain in children.

Managing Pediatric Pain - Steven M. Selbst, MD
Discuss the reasons for inadequate pain control; Utilize age-dependent pain scales to assess pain; Prescribe the appropriate analgesics for mild to moderate pain and moderate to severe pain; Implement the American Academy of Pediatrics guidelines for moderate sedation; and Elaborate on the advantages and disadvantages of different local anesthetics and sedative agents.

Neuropathic Pain Management - Gregory L. Holmquist, PharmD
Differentiate neuropathic pain from other pain types; Explain opioid-induced hyperalgesia; Review risks, benefits, and efficacy of nonsteroidal anti-inflammatory drugs and antidepressants in treatment of neuropathic pain; Select an effective anticonvulsant for neuropathic pain; and Discuss the role of topical agents and cannabinoids.

Pain and Aging - Perry G. Fine, MD
Address the consequences of persistent pain in older patients; Identify and document a patient’s unique pain signature.; Recognize the physical changes of aging that affect pharmacotherapy; Differentiate among tolerance, dependence, addiction, and pseudoaddiction in patients on pharmacotherapy; and Adapt a patient’s pain management therapy to meet his or her changing medical, social, and/or psychologic circumstances.

Orthopedics for the Internist - Duncan Q. McBride, MD and Bradford O. Parsons, MD
Perform a thorough evaluation of a patient who presents with a complaint of low back pain (LBP); Differentiate between patients who are candidates for lumbar spine surgery and those whose LBP can be managed conservatively; Prescribe appropriate and effective pharmacotherapy for the patient diagnosed with radiculopathy and/or a herniated lumbar disk; Diagnose the cause of a patient’s shoulder pain; Treat shoulder impingement and adhesive capsulitis with appropriate therapy and medication.

Neuropathic Pain/ Pressure Headaches - Steven B. Graff-Radford, DDS and Robert G. Kaniecki, MD
Explain the pathophysiology and pharmacotherapy of trigeminal neuralgia; Describe surgical interventions for trigeminal neuralgia; Review processes involved in the development of neuropathic pain after nerve injury; Treat post-lumbar puncture headaches; and Relieve headaches due to intracranial hypertension by correcting intracranial pressure.
Headache - Jan Lewis Brandes, MD, MS and James W. Banks III, MD

Summarize the effects of changing levels of estradiol on migraine headaches; Determine whether patients’ migraine headaches are influenced by hormonal changes and whether hormonal therapy is appropriate; Recognize the prevalence of self-medication with over-the-counter medications (OTCs) among patients with headaches and advise patients on the best use of these agents; Evaluate the strength of the clinical data that support the efficacy of OTCs; and Identify the potential interactions of concern between triptans and other commonly used medications as well as drugs used for migraine prophylaxis.

Highlights from Updates in Headache 2011 - Jose Biller, MD and Jan Lewis Brandes, MD

Identify possible causes of thunderclap headache; Diagnose various conditions associated with cerebral arterial vasoconstriction, encephalopathy, and cerebral autosomal dominant arteriopathy with subcortical infarcts and leukoencephalopathy syndrome; Diagnose migraine with and without aura and identify patients with migrainous vertigo; Prescribe appropriate therapy for prophylaxis and acute attacks of migraine with vertigo; Recognize the symptoms of postural orthostatic tachycardia syndrome and treat with diet, exercise, and medications.

Highlights from the 25th Annual Practical Physician's Approach to the Difficult Headache Patient - Roger K. Cady, MD and Steven B. Graff–Radford, DDS

Diagnose posttraumatic headache (PTHA); Recognize the features, patterns, and phenotypes of PTHA in different patients and prescribe optimal treatment on the basis of these findings; Differentiate between trigeminal neuralgia and psychogenic, neurovascular, and neuropathic facial pain; Choose treatment options, including microvascular decompression, balloon gangliolysis, and gamma knife radiosurgery for trigeminal neuralgia; and Perform blocking of the stellate or sphenopalatine ganglion to diagnose and treat trigeminal deafferentation.

Psychosocial Approaches to Pain Management - Daniel M. Doleys, PhD

Discuss chronic pain along with the factors and behaviors associated with it; Describe the role of cognitive processes as they relate to interventions for and coping with chronic pain; Discuss the relationship between depression, anxiety, and chronic pain; Consider the role of addiction in the management of chronic pain; and Recognize the benefits and limitations of various treatment options for chronic pain