



Review Article

Oncological Pain and the Stressful Sequel Affecting Quality of Life in an Uncertain World: A Narrative Review

Dennis Adjepong, MD, MBA¹ , Dennis Brako Sarpong, MD, MHA², Naa Oyoo Shidaa Korney, MD, MHA² and Kwaku Amoateng³

¹Department of Neurological Surgery, California Institute of Behavioral Neurosciences & Psychology, Fairfield, USA

²Washington Adventist University, Takoma Park, USA

³University of Medicine & Pharmacy of Targus Mures, Transylvania, Romania

Abstract

Cancer pain remains one of the most intractable supportive care issues to manage. Most health expert's struggles with outpatient management of cancer pain in adults and pharmacists do play a significant role in the recommendation of the agents, titration, and conversions. The pain management among adults with cancer remains one of the primary concerns for most surgeons. An important aspect of pain management is breakthrough cancer pain. This is also a key area for improvement in most of the pharmacist is currently struggling with. This study finds out that appropriate pain management in the oncology patients can significantly increase the life quality for such patients and, eventually, the overall rate of survival of the patient.

Keywords: Cancer; Intractable; Oncological Pain

Introduction

Pain is joint for a patient with cancers particular hos in the advance stage of the condition, and when the prevalence rate is estimated to be over 70% [1]. The pain among oncology patients is the major contributing factor to sick physical and emotional wellbeing [2].

***Corresponding author:** Dennis Adjepong, Department of Neurological Surgery, California Institute of Behavioral Neurosciences & Psychology, Fairfield, USA, Tel: +1 5712771998; E-mail: adjepongdennis1@gmail.com

Citation: Adjepong D, Sarpong DB, Korney NOS, Amoateng K (2020) Oncological Pain and the Stressful Sequel Affecting Quality of Life in an Uncertain World: A Narrative Review. J Surg Curr Trend Innov 4: 045.

Received: April 03, 2020; **Accepted:** September 04, 2020; **Published:** September 11, 2020

Copyright: © 2020 Adjepong D, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

The most comprehensive systematic review does indicate pain prevalence that ranges from 33% in the patient of cancer after curative treatment, to 59% in the patients of diseases on the anticancer therapy and 64% in the patients with the metastatic, advanced or terminal conditions [2]. Pain has a considerably higher prevalence's earlier in disorders in the specific cancer types like the article 44%, and he head and necks cancer 40% [3]. The increased level of survival with either life-prolonging treatment treatments or curative treatment results in the superior numbers of the patients experiencing the persistent kind of pain as a result of the procedure or diseases or even a combination of the two factors [4].

Methods

The study did examine various journals of healthcare which address pain management on a patient of cancer [5]. It reviewed the different types of tumors and the various process of the pain management of the disease [6]. The survey considered a total of 50 cases of patients with intractable oncology from the diverse healthcare setting to establish the various methods of pain management among the multiple patients [7]. The different effects of pain management were recorded and compared to the other methods of pain management of the patients considered [8].

Results

The study did find out the pain management among cancer patients is one of the most concerning problems of the time [9]. With the increasing prevalence of the condition, the cancer patients keep on relying on the traditional method of pain management [10]. Among the 50 patients considered for the different types of cancer, the pain management stood out as one very complex element of their treatment [11]. However, the survival rate among the patient with the disease did go up due to the introduction of the trustworthy method of management With the exception of some simple injection as a mean of managing the oncology pains [12]. Implementation of the intervention therapies of pain management has been advanced, and the patient does experience a higher rate of survival as a result of the same [13].

Pathophysiology

There are various challenges that most physicians do encounter in the treatment of the pain for the patient of cancer. Generally, pain is a subjective feeling that has not been easily and universally quantified [14]. The patients with a similar type of cancer may at time experiences the various intensities of the pain may in most cases respond to the same analgesic in the multiple means and way exhibit the different activities to the advice kind of effects from many of the drug used in the management of the pain associated with the cancer tumor [15]. Depending on the type o and the level of cancer, the administration of the pain management drugs may be different and may be limited and more innovative methods of drug delivery and may need to be utilized. The dreg administration also can, in some cases, be based on the nature of the pain [16].

Persistent pains are one of the common symptoms that patients of cancer do experience. It is generally defined as an unpleasant multi-dimensional, sensory, and emotional experience that is linked to the actual of in another case, the potentials damage of the tissues or described concerning such damage [17]. Cancer pain has various causes such included advanced diseases, neuropathy, weaken of the bones or invasion, infection, postoperative impacts, and the factors associated with the growth of the tumor and the chemotherapy in the process of treatment [18]. The pharmacist does play a significant role in the Oncologic management of pain, whether through the advising patient during physicians' grounds, counseling of patients at an infusion center and or the patients advising of the pain treatment at the local pharmacy [19].

Genetics

There is little genetics relation between cancer pain and the generically history connection. No studies have revealed that the pain as a result of the cancer is inheritable along with any familial background [20].

Biochemistry

In a situation where the pharmacotherapy is unsuccessful in the pain management for individuals with cancer and in cancer pain management, various biochemical factors can be the actual cause of the same. The multiple benefits associated with it do the barriers to the exact cause of pain management regardless of the real reason.

Clinical implication

There is a substantial amount of evidence that do link survival in oncology parents to the control of pain, and under-treatments of pain has been in the longest time been documented in the many medical settings [21]. However, the actual pain that is managed in the oncology situation is a subjective scenario, which nevertheless makes it quite a problem in assessing the accurate patient's condition or the level of pain [22]. This is because it requires reliance on the actual self-assessment using actual pain sales. If the pain in these scenarios is not adequately controlled, it often can result in the kind of function of impairments like the declining level of activity, patients' loss of appetite, sleep, and generally poor quality of life [23].

Scientific Analysis

The two sources which were considered for the study were Perkütan and Saiki. However, I do find the second article more revealing in terms of information and illustration of various elements of cancer pain management. The first article is good but is only limited to particular types of cancers, unlike the second one, which touches on every element of the disease.

Conclusion

Pain management for oncology patients is considered one of the fast-growing disciplines that require the surgeons to stay updated on the essential guidelines to be able to make a proper recommendation concerning the sequel [24]. It has become difficult to manage pain for cancer patients as other various factors do play a key role. All the versions procedure of medication that the patients are taking must, therefore, be reviewed for drug-drug interactions.

References

1. Afsharimani B, Kindl K, Good P, Hardy J (2015) Pharmacological options for the management of refractory cancer pain-what is the evidence? *Supportive Care in Cancer* 23: 1473-1481.
2. Portenoy RK, Ahmed E, Keilson YY (2016) Cancer pain management: Adjuvant analgesics (coanalgesics). UpToDate, Massachusetts, USA.
3. Reddy GD, Okhuysen-Cawley R, Harsh V, Viswanathan A (2013) Percutaneous CT-guided cordotomy for the treatment of pediatric cancer pain. *J Neurosurg Pediatr* 12: 93-96.
4. Nugent SM, Morasco BJ, O'Neil ME, Freeman M, Low A, et al. (2017) The effects of cannabis among adults with chronic pain and an overview of general harms: a systematic review. *Ann Intern Med* 167: 319-331.
5. Abdolmohammadi S, Héту PO, Néron A, Blaise G (2015) Efficacy of an intrathecal multidrug infusion for pain control in older adults and in end-stage malignancies: a report of three cases. *Pain Research and Management* 20: 118-122.
6. O'Brien T, Kane CM (2014) Pain services and palliative medicine - an integrated approach to pain management in the cancer patient. *British journal of pain* 8: 163-171.
7. Satija A, Ahmed SM, Gupta R, Ahmed A, Rana SP, et al. (2014) Breast cancer pain management - a review of current & novel therapies. *Indian J Med Res* 139: 216-225.
8. Kanpolat Y, Ozdemir M, Al-Beyati E (2013) CT-guided percutaneous cordotomy for intractable pain in what is more than a disease: lung malignancies. *Turk Neurosurg* 23: 81-87.
9. Kurdi MS, Theerth KA, Deva RS (2014) Ketamine: current applications in anesthesia, pain, and critical care. *Anesth Essays Res* 8: 283-290.
10. Howard RF, Wiener S, Walker SM (2014) Neuropathic pain in children. *Arch Dis Child* 99: 84-89.
11. Brant JM, Keller L, McLeod K, Yeh C, Eaton LH (2017) Chronic and refractory pain: A systematic review of pharmacologic management in oncology. *Clin J Oncol Nurs* 21: 31-53.
12. Eccleston C, Morley SJ, de Williams AD (2013) Psychological approaches to chronic pain management: evidence and challenges. *British journal of anaesthesia* 111: 59-63.
13. Prommer EE (2015) Pharmacological management of cancer-related pain. *Cancer Control* 22: 412-425.
14. Fallon MT (2013) Neuropathic pain in cancer. *British journal of anaesthesia* 111: 105-111.
15. Davies PS (2016) Pharmacologic pain management at the end of life. *The nurse practitioner* 41: 26-37.
16. Beatty GL, O'Hara MH, Nelson AM, McGarvey M, Torigian DA, et al. (2015) Safety and antitumor activity of chimeric antigen receptor modified T cells in patients with chemotherapy refractory metastatic pancreatic cancer. *Journal of Clinical Oncology* 33: 3007.
17. Mooney JJ, Pagel PS, Kundu A (2014) Safety, tolerability, and short-term efficacy of intravenous lidocaine infusions for the treatment of chronic pain in adolescents and young adults: a preliminary report. *Pain Medicine* 15: 820-825.
18. de la Calle Gil AB, Vergara IP, Bornacelly MA, Gallego AP (2015) Intrathecal ziconotide and morphine for pain relief: a case series of eight patients with refractory cancer pain, including five cases of neuropathic pain. *Neurology and therapy* 4: 159-168.
19. Madden K, Bruera E (2017) Very-low-dose methadone to treat refractory neuropathic pain in children with cancer. *Journal of palliative medicine* 20: 1280-1283.

20. Shah RD, Cappiello D, Suresh S (2016) Interventional procedures for chronic pain in children and adolescents: a review of the current evidence. *Pain Practice* 16: 359-369.
21. Bell RF, Eccleston C, Kalso EA (2017) Ketamine as an adjuvant to opioids for cancer pain. *Cochrane Database of Systematic Reviews* 6: CD003351.
22. Kim A, Widemann BC, Krailo M, Jayaprakash N, Fox E, et al. (2015) Phase 2 trial of sorafenib in children and young adults with refractory solid tumors: a report from the Children's Oncology Group. *Pediatric blood & cancer* 62: 1562-1566.
23. Janjan N (2014) Improving cancer pain control with NCCN guideline-based analgesic administration: a patient-centered outcome. *Journal of the National Comprehensive Cancer Network* 12: 1243-1249.
24. Ju Y, Tian D, Tan Y, Fu Z (2018) Palliative care with cervical intrathecal infusion and external pump for a late-stage cancer patient with refractory pain. *Medicine* 97: 9714.



- Advances In Industrial Biotechnology | ISSN: 2639-5665
- Advances In Microbiology Research | ISSN: 2689-694X
- Archives Of Surgery And Surgical Education | ISSN: 2689-3126
- Archives Of Urology
- Archives Of Zoological Studies | ISSN: 2640-7779
- Current Trends Medical And Biological Engineering
- International Journal Of Case Reports And Therapeutic Studies | ISSN: 2689-310X
- Journal Of Addiction & Addictive Disorders | ISSN: 2578-7276
- Journal Of Agronomy & Agricultural Science | ISSN: 2689-8292
- Journal Of AIDS Clinical Research & STDs | ISSN: 2572-7370
- Journal Of Alcoholism Drug Abuse & Substance Dependence | ISSN: 2572-9594
- Journal Of Allergy Disorders & Therapy | ISSN: 2470-749X
- Journal Of Alternative Complementary & Integrative Medicine | ISSN: 2470-7562
- Journal Of Alzheimers & Neurodegenerative Diseases | ISSN: 2572-9608
- Journal Of Anesthesia & Clinical Care | ISSN: 2378-8879
- Journal Of Angiology & Vascular Surgery | ISSN: 2572-7397
- Journal Of Animal Research & Veterinary Science | ISSN: 2639-3751
- Journal Of Aquaculture & Fisheries | ISSN: 2576-5523
- Journal Of Atmospheric & Earth Sciences | ISSN: 2689-8780
- Journal Of Biotech Research & Biochemistry
- Journal Of Brain & Neuroscience Research
- Journal Of Cancer Biology & Treatment | ISSN: 2470-7546
- Journal Of Cardiology Study & Research | ISSN: 2640-768X
- Journal Of Cell Biology & Cell Metabolism | ISSN: 2381-1943
- Journal Of Clinical Dermatology & Therapy | ISSN: 2378-8771
- Journal Of Clinical Immunology & Immunotherapy | ISSN: 2378-8844
- Journal Of Clinical Studies & Medical Case Reports | ISSN: 2378-8801
- Journal Of Community Medicine & Public Health Care | ISSN: 2381-1978
- Journal Of Cytology & Tissue Biology | ISSN: 2378-9107
- Journal Of Dairy Research & Technology | ISSN: 2688-9315
- Journal Of Dentistry Oral Health & Cosmesis | ISSN: 2473-6783
- Journal Of Diabetes & Metabolic Disorders | ISSN: 2381-201X
- Journal Of Emergency Medicine Trauma & Surgical Care | ISSN: 2378-8798
- Journal Of Environmental Science Current Research | ISSN: 2643-5020
- Journal Of Food Science & Nutrition | ISSN: 2470-1076
- Journal Of Forensic Legal & Investigative Sciences | ISSN: 2473-733X
- Journal Of Gastroenterology & Hepatology Research | ISSN: 2574-2566
- Journal Of Genetics & Genomic Sciences | ISSN: 2574-2485
- Journal Of Gerontology & Geriatric Medicine | ISSN: 2381-8662
- Journal Of Hematology Blood Transfusion & Disorders | ISSN: 2572-2999
- Journal Of Hospice & Palliative Medical Care
- Journal Of Human Endocrinology | ISSN: 2572-9640
- Journal Of Infectious & Non Infectious Diseases | ISSN: 2381-8654
- Journal Of Internal Medicine & Primary Healthcare | ISSN: 2574-2493
- Journal Of Light & Laser Current Trends
- Journal Of Medicine Study & Research | ISSN: 2639-5657
- Journal Of Modern Chemical Sciences
- Journal Of Nanotechnology Nanomedicine & Nanobiotechnology | ISSN: 2381-2044
- Journal Of Neonatology & Clinical Pediatrics | ISSN: 2378-878X
- Journal Of Nephrology & Renal Therapy | ISSN: 2473-7313
- Journal Of Non Invasive Vascular Investigation | ISSN: 2572-7400
- Journal Of Nuclear Medicine Radiology & Radiation Therapy | ISSN: 2572-7419
- Journal Of Obesity & Weight Loss | ISSN: 2473-7372
- Journal Of Ophthalmology & Clinical Research | ISSN: 2378-8887
- Journal Of Orthopedic Research & Physiotherapy | ISSN: 2381-2052
- Journal Of Otolaryngology Head & Neck Surgery | ISSN: 2573-010X
- Journal Of Pathology Clinical & Medical Research
- Journal Of Pharmacology Pharmaceutics & Pharmacovigilance | ISSN: 2639-5649
- Journal Of Physical Medicine Rehabilitation & Disabilities | ISSN: 2381-8670
- Journal Of Plant Science Current Research | ISSN: 2639-3743
- Journal Of Practical & Professional Nursing | ISSN: 2639-5681
- Journal Of Protein Research & Bioinformatics
- Journal Of Psychiatry Depression & Anxiety | ISSN: 2573-0150
- Journal Of Pulmonary Medicine & Respiratory Research | ISSN: 2573-0177
- Journal Of Reproductive Medicine Gynaecology & Obstetrics | ISSN: 2574-2574
- Journal Of Stem Cells Research Development & Therapy | ISSN: 2381-2060
- Journal Of Surgery Current Trends & Innovations | ISSN: 2578-7284
- Journal Of Toxicology Current Research | ISSN: 2639-3735
- Journal Of Translational Science And Research
- Journal Of Vaccines Research & Vaccination | ISSN: 2573-0193
- Journal Of Virology & Antivirals
- Sports Medicine And Injury Care Journal | ISSN: 2689-8829
- Trends In Anatomy & Physiology | ISSN: 2640-7752

Submit Your Manuscript: <https://www.heraldopenaccess.us/submit-manuscript>