

What to do while looking for a GOOD Pain Doctor!



The Pain Pal Series

by

Forest Tennant M.D., Dr. P.H.
Veract Intractable Pain Clinic
336 S. Glendora Ave.
West Covina, CA 91790
(626) 919-0064
Fax: (626) 919-0065
veractinc@msn.com

TABLE OF CONTENTS

WHY DID I WRITE THIS LITTLE HANDBOOK?

WHAT TO DO?

WHY YOU CAN'T ENDURE PAIN.

ENLIST A SPECIAL SOMEONE TO HELP.

APPROACH NO. 1: SELF-HELP WITH NON-PRESCRIPTION MEDICINES

1. THE RIGHT VITAMINS AND AMINO ACIDS
2. NON-PRESCRIPTION PAIN RELIEVERS
3. BENEFITS OF HEAT AND COLD
4. FIND A TOPICAL THAT WORKS
5. REDUCE YOUR RETAINED ELECTRICITY
6. GET SOME SLEEP
7. EXPERIMENT WITH SOME NATURAL HEALERS
8. EAT EXTRA PROTEIN
9. KEEP MOVING AND STRETCHING

APPROACH NO. 2: PRESCRIPTION MEDICINE YOUR LOCAL DOCTOR WILL PRESCRIBE

1. ASK FOR THESE PRESCRIPTION DRUGS BY NAME
2. TENS: A GREAT ADD-ON TREATMENT
3. TIPS ON HOW TO APPROACH A DOCTOR FOR PAIN MEDICATION

FINAL ADVICE

1. WHAT IF THE APPROACHES IN THIS HANDBOOK DON'T SUFFICE?
2. HOW TO FIND A GOOD PAIN DOCTOR
3. WHAT IF YOUR PROBLEM IS SIMPLY NOT ENOUGH OPIOIDS?
4. TWO SIMPLE RULES FOR CHRONIC PAIN PATIENTS

WHY DID I WRITE THIS LITTLE HANDBOOK?

There isn't a day that goes by that I don't get at least one phone call, fax, or e-mail from a desperate person with chronic, severe pain who can't find a good pain doctor. Patients tell me that most doctors they encounter don't treat pain, won't prescribe opioids, or have the time to work a new patient into a busy medical practice. Many doctors restrict their pain relief medicine dosages and tell patients to "live with it" leaving the patient still suffering. Worse, a lot of doctors who hold out as "pain specialists" tell patients they only perform nerve blocks or related "interventions" and don't do medical management which requires that a doctor prescribe opioids and accept the patient for long term care.* The very worst are "pseudo" pain doctors who tell patients they will have less pain if they withdraw from all drugs and admit they are really an addict whose pain is simply "in their head". Don't buy it. Read on. There's plenty of help and some great - not just good - pain doctors.

WHAT TO DO?

This handbook outlines two approaches to keep you healthy and comfortable until you find a good pain doctor:

Approach #1. A self-help, do-it-yourself program using inexpensive non-prescription drugs and dietary supplements that are widely available in your local pharmacies and health food stores.

Approach #2. Enlist a local doctor of your choosing to prescribe some prescription drugs which almost any doctor will prescribe.

If you carefully and diligently follow these 2 approaches, you will stay alive and mentally function well-enough to buy you enough time to find a good pain doctor. If you diligently follow these approaches, you may even find them effective enough that you won't require a pain doctor. There are more and more pain doctors coming on line who competently provide medical pain management. In the meantime, take good enough care of yourself to prevent your severe pain from destroying your mind, hormone system, tissues, or driving you to suicide.

WHY YOU CAN'T ENDURE PAIN?

Don't just endure pain and lay crying in bed, ponder in despair, or think about suicide. Help is available and good pain doctors who care and know what to do are slowly emerging all over the country. Travel out-of-state to see one if you must. But until you find one, protect yourself from the ravages of pain.

Yes, I said ravages. Pain doesn't just make you miserable and ruin your quality of life. Daily it eats away at your brain, tissues, blood vessels, and hormones. Fundamentally, chronic pain accelerates aging and sends you to a grave long before your time. Most severe, untreated pain patients die of a heart attack, stroke, or infection. If you don't die early in life from your pain, you will likely end up with dementia and lose your precious mental capacities. Indeed, some of my recommendations are to protect your brain and heart until you get the help you need.

**Footnote: Interventional pain specialists are usually anesthesiologists or rehab doctors who take special training to do injections around the spinal cord. These injections can be very helpful, particularly if given within one year after the pain begins.*

ENLIST A SPECIAL SOMEONE TO HELP?

Hopefully, you have a spouse, significant other, family member or friend who can help. You'll need a "special someone" to help you shop at the pharmacy and health food store to follow these approaches. You may also want to shop on the internet, order from a catalogue, or buy from a direct marketing company.

Show your "special someone" this little handbook so they may better understand your needs.

APPROACH NO. 1: SELF-HELP WITH NON-PRESCRIPTION MEDICINES

STEP ONE: THE RIGHT VITAMINS AND AMINO ACIDS

Go to your local pharmacy or health food store and get the following to take on a daily basis.

1. A vitamin-mineral-herbal formula which contains magnesium, folic acid, and B12. This can be a tablet, capsule, powder, or drink. Take 2 times a day. Extra or supplemental B12, folic acid, and magnesium may help you.
2. Vitamin D₃ - Often called Calcitrol. Take 2000 units a day which is usually 1 capsule.
3. Taurine or gamma amino butyric acid, 500 or 750mg - Take 2 at a time 4 times a day. (Total of 8)* Take on an empty stomach with cold fluids.

STEP ONE

- Multi-vitamin/mineral/herb preparation with folic acid, B12, and magnesium
- Vitamin D3 (Calcitrol)
- Taurine or gamma amino butyric acid

**Footnote: Taurine and Gamma-amino-butyric Acid are the amino acids that the body naturally uses to block the electrical impulses of pain. Chronic, severe pain depletes these biochemicals. They do not have drug interactions since they are natural compounds. You can take them with any prescription medication. Gamma-amino-butyric Acid can cause temporary flushing similar to niacin. You can try either one or both to see which best controls your pain.*

STEP TWO: NON-PRESCRIPTION PAIN RELIEVERS

Go to a pharmacy that stocks a lot of non-prescription supplies. Purchase a bottle of these 2 pain relievers:

1. Ibuprofen (Advil® and Motrin® are common trade names) The dose of one non-prescription tablet is 200mg. The prescription dosages are 400 or 800mg in each tablet.*
2. Naproxen (Aleve® is the trade name product). Dosage is 220mg a tablet. The prescription dosage is 275 or 550mg in each tablet.²

For 2 days each, try one and then the other. Take 1 to 2 every four hours. A two day trial is enough time to determine which works best on you.

**Footnote: The over-the-counter, non-prescription forms of ibuprofen and naproxen are about 1/2 to 1/4 the dosage of what a physician will prescribe. Consequently, you may have to exceed the dosage on the label to get pain relief. These agents are classified as anti-inflammatory pain relievers. Their common side-effects are nausea, vomiting, and internal bleeding caused by stomach irritation.*

CRITICAL INSTRUCTIONS ON HOW TO TAKE THESE PAIN RELIEVERS

1. Take Ibuprofen and Naproxen with another drug which I call a "potentiator", since it makes these pain relievers more "potent".
2. Listed here are the potentiators you should try with ibuprofen or naproxen.

Initially try one of each with ibuprofen or naproxen to find out which is the most effective.

- a. Acetaminophen - 1 tablet
- b. Excedrin® - 1 tablet
- c. Aspirin - 1 tablet
- d. Immodium® - 1 tablet **
- e. Benadryl® - 1 capsule of 25mg

Caution: If any of these cause you nausea, vomiting, bleeding, or black stools, you must stop them. Take an antacid, milk, or Pepto-bismol if you have nausea. Black stools are caused by internal bleeding, and you will need to consult a doctor if this occurs.

*** Immodium® is the trade name for loperamide which is the only opioid drug that is non-prescription. It is sold over-the-counter for treatment of diarrhea although it has pain relieving effects when taken with ibuprofen or naproxen. Too much could possibly cause constipation.*

STEP THREE - BENEFITS OF COLD AND HEAT

Obtain some hot and cold packs from a pharmacy. There are many brands to choose from. Most of the cold packs can be kept in your refrigerator for repeat use. Heat is most effective after a pain-relieving cream has been applied and massaged into the skin over your painful area. Heat drives the medication through the skin to give better relief. Heat relaxes painful tissue and increases blood supply. Apply some heat daily for at least 5 minutes to promote the healing effects that heat can bring. Cold works differently. A cold pack or ice may only need to be applied for a few seconds to be helpful. You can simply touch your pain sites until you feel some relief. Cold alters and diminishes trapped electricity, heat, and inflammation caused by damaged nerves and pain. You can alternate heat and cold. Always keep hot and cold packs ready to use on pain flare days.

NOTE: Some persons can only tolerate heat or cold but not both.

STEP FOUR - FIND A TOPICAL THAT WORKS

Purchase a variety of pain-relieving creams, lotions, ointments or sprays from a pharmacy, health food store, internet, catalogue, or direct marketing company. Topicals are so-named, because you apply them to the "top" of the skin. You will find one or more that work on your pain if you test a few. Listed here are some of my favorites. You may find another one you like better, if you experiment with several.

Massage a topical into your pain sites and put heat or cold over them for best effects. Topicals are funny. One may not work for everybody, and it may not even work on all parts of your body.

Alcis®
Freeze It®
Magnesium in Oil
Aloe Vera
Copper cream
Cats Claw®
Boswellia

Topical agents work best with massage, vibrator, infrared, or ultrasound. Often two or more at the same time work better than one alone.

STEP FIVE - REDUCE YOUR RETAINED ELECTRICITY*

You must remove the trapped electricity (i.e. energy, heat) around your painful body sites. A damaged or dysfunctional nerve traps the electricity that your nerves constantly generate. Retained electricity may cause pain flares, burning, itching, redness, jerking and twitching, insomnia, headache, and loss of appetite. You must remove your excess electricity every day since nerves constantly make it.

Do at least 2 of the following each and every day to reduce the electricity that is trapped by your damaged nerves.

**Chronic pain is partly due to damaged nerves that constantly produce and retain or "trap" electricity. A build up of too much electricity causes a pain flare, inflammation, and additional damage to the body. The prevention and reduction of retained electricity must be a daily practice to adequately control pain. I call this concept the "Theory of Retained Electricity". Copper, brass, magnesium, and magnets act as a "lightning rod" and attract trapped electricity. The tissues of the body are negatively charged while metals like copper and magnesium are positive and attract or "pull out" retained or trapped electricity. The word "grounding" is related to the fact that electricity is neutralized or dissipated when it reaches the ground. This is why walking barefoot on grass or sand is helpful.*

1. Walk barefoot on sand or grass for at least 5 minutes;
2. Take a hot bath with Epson Salts which are magnesium sulfate. Alternatively, sit in a Jacuzzi or walk in a swimming pool for a minimum of 5 minutes;
3. Wear a copper or magnetic bracelet, anklet, or necklace. Maximal time is about 2 hours; (They can make pain worse if worn too long.)
4. Rub your painful sites with a copper object - time is 1 to 3 minutes. Use brass if you don't have anything made of copper, since brass is mostly copper;
5. Magnets: Apply to your painful site, stand on a magnetic floor mat, lay on a magnetic mattress, or wear magnetic soles in your shoes. Minimal time is 30 minutes;
6. Massage one of the creams listed in Step Four above into your painful sites;
7. Apply a cold pack or ice to your painful site. Minimal time is 30 seconds;
8. Massage the acupressure sites nearest to your pain site. Time is 1 to 2 minutes. You can go to www.acupressure.com for help.
9. Get a acupuncture or massage treatment from one of the clinics that are now in every community. You or your special someone can actually learn massage techniques and save money.

STEP SIX - GET SOME SLEEP

Most severe pain patients can only sleep 2 to 4 hours before their pain will awaken them. You can promote sleep by using one of these three medications. You can obtain these 3 without a prescription at pharmacies or health food stores.

Tryptophan 1000mg
Melatonin 3 to 6mg
Diphenhydramine (Benadryl®) 25mg

You may combine these sleep medications.
--

STEP SEVEN - EXPERIMENT WITH SOME NATURAL HEALERS

Try some of the natural healers that patients and doctors have praised over a long period of time. No guarantees but here are my favorites. These come in tablets or capsules. Follow the instructions on the bottle.

Boswellia

Aloe Vera

Alpha Lipoic Acid

Glucosamine - particularly mixed with Boswellia

When you try one of these, you will need to take it for at least 2 weeks to feel any results.

Also, go to a health food store and purchase pregnenolone, 50mg. Take 3 a day. Try this for 10 days. Pregnenolone is the natural body chemical that makes many of your hormones including testosterone, estrogen, and cortisone. It also acts as a natural pain reliever in the brain and spinal cord. It's very safe which is why it's sold without a prescription in health food stores.

STEP EIGHT - EAT EXTRA PROTEIN AND AMINO ACIDS

Protein contains the amino acids that make the body's natural pain relievers: endorphin, gamma amino butyric acid, serotonin, and dopamine. Each day eat a food that contains a lot of protein. The following are about the only foods that are, by weight, over 50% protein: eggs, cheese, fish, poultry, pork, or beef. Many pain patients report that fish oil capsules help them. Also, I have patients who feel they benefit from the amino acids carnitine, arginine, phenylalanine, and glycine. There are no controlled studies to definitely confirm a benefit to fish oil and some of the amino acids, but they can be cheaply obtained without a prescription from health food stores, catalogues, direct marketing companies and the internet. They are worth trying, and adding to your self-help program.

STEP NINE - KEEP MOVING AND STRETCHING

Immobility is your enemy. You must get enough pain relief to get out of bed, stretch, and walk early each morning. If you spend too much time in bed or on the couch, tissue around your pain sites will atrophy and contract. This will likely cause you, in the end, to have more pain and immobility. To protect your pain site, you must stretch the area several times a day.

Try to maintain, proper posture. The natural alignment of the body is to stand up straight and walk without a limp or foot drag. Do this daily. Also, sit up straight and try not to lean too much to protect your painful areas.

Do these 3 things: move, stretch, and do it again.

APPROACH NO. 2 - PRESCRIPTION DRUGS YOUR LOCAL DOCTOR WILL PRESCRIBE

STEP ONE

ASK FOR THESE PRESCRIPTION DRUGS BY NAME

Ask a local physician, nurse practitioner, and/or physician assistant (PA) to prescribe some of the following prescription medications listed here. What the vast majority of MD's won't do is give you a potent opioid drug. However, today they will prescribe a wide variety of effective prescription drugs. Doctors want to help. Few, however, have had any pain training, so they will not prescribe the most potent pain relievers.

Ask specifically for one or more of the following by name:

1. Topical – applied to skin

- a. Lidoderm® Patch
- b. Flector® Patch
- c. Voltaren® Gel

2. Nerve Block Agents

- a. Cymbalta®
- b. Lyrica®

3. Mild Pain Relievers ⁵

- a. Fioricet® with or without codeine
- b. Butalbital with or without codeine
- c. Tramadol (Ultram® or Ultracet®)
- d. Ibuprofen (Motrin®) or other anti-inflammatory drug

4. Stronger (Not Strongest)

- a. Propoxyphene (Darvon®)
- b. Hydrocodone (Vicodin®, Norco®, Lortab®)

STEP TWO

TENS: A GREAT ADD-ON TREATMENT

TENS stands for Transcutaneous Electrical Nerve Stimulation. It is a small electric box which is not implanted but is worn on your belt. It sends a low level electric current into your painful area, and it enhances the spinal cord to block pain signals. TENS also activates endorphins. I personally believe the electric current additionally drives out or "unplugs" some retained electricity. A TENS unit requires a doctor's prescription.

In the past many people, including you, may have tried TENS and found it to be worthless for pain relief. Here are the facts as I've learned them. TENS really helps once your self-help and medication program gives you about 60 to 70% pain relief. If you add TENS treatment, you'll get another 10 to 20% relief. By itself, TENS isn't usually much help.

Don't let anyone, including doctors, tell you that TENS, nerve blocks, psychotherapy, or physical therapy is a substitute for medication. They are not. Obtain the medications you need - FIRST. Once you attain 60 to 75% pain relief, try non-medical measures including TENS. You can always stop pain medicine if you find a substitute.

TIPS ON HOW TO APPROACH A DOCTOR FOR PAIN MEDICATION

It is critical that you approach a doctor correctly. If you just ask for pain medication, he/she may show you the door, and rightly so. Why? Every doctor in America has been propositioned by so many drug abusers and sellers of drugs that he/she will likely be suspicious of anyone who claims pain and asks for drugs. Do the following:

1. Get an at-home blood pressure-pulse rate device and make a record of your blood pressure and pulse rate. If the non-prescription measures described in self-help Approach No. 1 don't control your pain, you will likely have elevated blood pressure and/or pulse rates during pain flares. Keep a record and show it to your doctor. He'll be impressed and more willing to help if you've done some preliminary details, and documented that you have severe pain.

1. Take that special someone with you to vouch that you have legitimate pain.

2. Make a written list of all the measures you have tried. Note on your list if the measure was helpful, hurtful, or wasteful.

3. Cooperate and don't argue with your doctor. Let the doctor know you will continue all the measures you've learned that help you as well as what the doctor prescribes.

WHAT IF THE APPROACHES IN THIS HANDBOOK DON'T SUFFICE?

Simple. You need a good pain doctor. One who specializes in medical management of severe, chronic pain. If you get only partial relief, review the approaches in this little handbook. Make sure you are diligently following them. Then keep looking for a good pain doctor.

You must definitely find a good pain doctor if your pain drives up your pulse and blood pressure and you've followed the measures in this handbook without much relief.

HOW TO FIND A GOOD PAIN DOCTOR?

Start asking around for a pain doctor that does "medical management" of severe pain. If you just ask for a "pain specialist" you may get sent to a doctor who only performs nerve blocks, epidural injections, or detoxes you (at great expense, of course!) rather than prescribe opioid drugs which you will require if the approaches in this little handbook don't keep you comfortable. Who do you ask? Start with your County or State Medical Associations. Some websites have a referral service. Your best bet is to ask other pain patients. Ask them which doctors arbitrarily restrict medication or dosages, so you can avoid them.

Do one other thing. Enlist a family member, significant other, clergyman, friend, or lawyer to help you find a "medical management" pain doctor. Some very good medical management pain doctors are now cropping up in most every state. You may have to travel out-of-state for awhile until one emerges near you, but your very life and quality of life may depend on your willingness to travel.

WHAT IF YOUR PROBLEM IS SIMPLY NOT ENOUGH OPIOIDS?

So often I receive calls from patients who know they can control their pain if their doctors would simply raise their dosage of opioids such as hydrocodone, morphine, methadone, fentanyl, or oxycodone. If this description fits you, you belong to a large group of suffering people. Thousands of patients are in agony and dying before their time due to bias against adequate opioid dosages. Obviously, this means its time to find a good pain doctor. But in the meantime start at Step One in Approach No. 1 in this little handbook. "Self Help" is the best medicine. Be aggressive in reducing your retained or trapped electricity. Keep a daily record of your blood pressure and pulse rate to help document that your pain is poorly controlled. Always remember that opioid drugs produce some complications, so avoid opioids or minimize your opioid dosage by following this little handbook.

TWO SIMPLE RULES FOR CHRONIC PAIN PATIENTS

The mere fact that you've read this little handbook tells me you are a chronic pain patient which means you've had daily pain for over 3 months. Rule No. 1 is to try and treat yourself with the approaches in this little handbook. "Self Help" is the best medicine. Rule 2 is to find medication that gives you 60 to 75 % pain relief BEFORE some practitioner talks you into some procedure, surgery, intervention or non-medical treatment. Written here are the "Self Help" fundamentals to chronic pain control. Master them.

ABOUT THE AUTHOR

Dr. Tennant started his pain clinic in 1975. Originally it focused on treating the pain of cancer and post-polio. He has authored over 300 scientific articles and books, and currently serves as Editor Emeritus of Practical Pain Management, the nation's most widely circulated pain journal for physicians.

He has formerly served as a Medical Officer in the US Army and US Public Health Service. In the past he has been a consultant to the US Food and Drug Administration, National Institute on Drug Abuse, Drug Enforcement Administration, LA Dodgers, National Football League, and NASCAR. He has authored another handbook for pain patients called "The Intractable Pain Patient's Handbook for Survival".