

Cancer Pain Education for Patients and the Public



Module I Pain Management Education for Individual Patient Education

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1980



*American Nursing Association
established patient education as a
nursing responsibility*

Study identified that patients receiving analgesics had a knowledge deficit regarding medication side effects.

1984

Jones, Rimer, Levy and Kinman; Cancer patients' knowledge, beliefs, and behavior regarding pain control regimens: Implications for education programs.

Patients were aware that there were other options available for pain management but didn't know what they were.

1989

Oncology Nursing Society - Education
Committee

Patient Barriers to Effective Pain Management

Reluctance to report pain

Concern about being a good patient

Fear of addiction

Worries about side effects

Fear that pain medication may be ineffective when needed

Part I. Teaching Principles for Pain Education

- ◆ Provide information that is accurate and current.
- ◆ Precede teaching session by establishing what the patient already knows.
- ◆ Establish goals and objectives with the patient/family to enhance cooperation and compliance.

Part I. Teaching Principles for Pain Education

- ◆ Teach the smallest amount possible rather than overload a patient who may already be overburdened by illness and pain.
- ◆ Use a combination of education methods.
- ◆ Keep the teaching session brief with breaks as needed by the patient.

Part I. Teaching Principles for Pain Education

- ◆ Present the most important material first.
- ◆ Use appropriate materials that convey the message/information to be taught.
- ◆ Evaluate the readability of written materials.
- ◆ Use written material in large print for elderly patients.

Part I. Teaching Principles for Pain Education

- ◆ Reinforce written information.
- ◆ Use illustrations and written materials that are clear and concise.
- ◆ Use repetition. Encourage questions.
- ◆ Involve family and supportive friends in the educational program.

Part I. Teaching Principles for Pain Education

- ◆ Define patients' responsibilities and providers' responsibilities for the pain management plan.
- ◆ Choose an environment that is quiet and comfortable for the patient and family.
- ◆ Individualize education with consideration for cultural influences.

Part I. Teaching Principles for Pain Education

- ◆ Include discussion on the role of the interdisciplinary team.



Part II. Assessing the Patient and Setting the Goals

- ◆ There are several patient groups who may not receive adequate pain control due to:
 - Age, e.g. older adults and young infants and children.
 - Cognitive or psychological impairments.
 - History of substance abuse.
 - Alterations in metabolism.

Part II. Assessing the Patient and Setting the Goals

- Alterations in route.
- Socioeconomic issues.
- Cultural background.

Part II. Assessing the Patient and Setting the Goals

- ◆ Questions to ask the patient about his pain-
Basic assessment information:
 - Where is the pain?
 - What does the pain feel like?
 - How bad is the pain?

Part II. Assessing the Patient and Setting the Goals

- What makes the pain better or worse?
- If undergoing current treatment for the pain, how well is it working?
- Has the pain changed?

Part II. Assessing the Patient and Setting the Goals

- ◆ Other information to gather from the patient:
 - Symptoms related to unrelieved pain.
 - What is the patient's current knowledge about pain and its management?
 - What is the patient currently doing to control his pain?

Part II. Assessing the Patient and Setting the Goals

- In the past, what has the patient used to relieve his pain?
- What meaning does the patient ascribe to his pain?
- What fears does the patient have related to his pain?

Part II. Assessing the Patient and Setting the Goals

- What fears does the patient have related to his pain?
- How much pain relief does the patient want or expect to achieve?
- What pain rating scale is the patient currently using or has he used?

Part III. Assess the Family Caregiver's Perception of the Pain Experience

- ◆ How does the family caregiver describe the pain?
- ◆ What impact does the pain have on the family caregiver?
- ◆ How has the pain affected the family caregiver's role and responsibilities?
- ◆ What roles does the family caregiver play in relation to pain management activities?

Part III. Assess the Family Caregiver's Perception of the Pain Experience

- ◆ What meaning does the family caregiver ascribe to the pain?
- ◆ What questions and concerns does the family caregiver have?

Part IV. Plan the Care

- ◆ Include the patient and family caregiver.
- ◆ What are the discharge needs for the patient and family caregiver?



Part V. Implement the Pain Management Program

- ◆ Provide culturally competent care
 - Demonstrate respect and sensitivity to issues related to an individual's culture, race, gender, sexual orientation, social class, and economic situation.

Part V. Implement the Pain Management Program

- ◆ Strategies for getting the patient and family caregiver involved in pain management activities:
 - Teach the patient and caregiver current cancer pain content.
 - Provide appropriate educational materials.

Part V. Implement the Pain Management Program

- Encourage self-care activities.
- Promote hope.
- Address patient's and caregiver's fears and concerns.
- Assist patient and caregiver to develop realistic goals.
- Teach patient and caregiver when to seek help and how to access resources.

Part V. Implement the Pain Management Program

- Encourage the patient to use a pain diary or pain log.
- Advocate for the use of consultants.
- Provide for follow up teaching.

Part VI. Evaluate and Document Outcomes of Patient-Caregiver Teaching

- ◆ Review pain diary or pain log.
- ◆ Document information given, what format used, who the information was given to.
- ◆ Document barriers to learning.
- ◆ Evaluate effectiveness of pain management strategies.

Part VI. Evaluate and Document Outcomes of Patient-Caregiver Teaching

- ◆ Evaluate patient's ability to carry out activities of daily living.
- ◆ Evaluate how the patient and caregiver are coping.
- ◆ Restate time and time again the information present in the teaching session.

Part VI. Evaluate and Document Outcomes of Patient-Caregiver Teaching

- ◆ Revise pain management strategies as necessary.

