

International Conference on

Hospice & Palliative Care

August 31-September 02, 2015 Orlando, USA

Patient-centered treatment of breakthrough cancer pain. Necessity, challenge, right, and how we can support affected patients even in worst pain situations: The German way

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 \mathbf{B} reakthrough cancer pain (BTCP) – an episodic pain that emerges through the treatment of otherwise well-managed chronic background pain – negatively affects function and quality-of-life of cancer patients and frequently results in a number of other physical, psychological, and social problems, which in total significantly impair patients ability to maintain or to regain control about their life as an independent and self-determined individual. In combination with the underlying cancer disease, BTCP is not a single entity but rather a manifestation of myriad pain-producing disorders. Therefore, its effective treatment depends either on a variety of biomedical, psychological and social factors that relate to the expression and experience of pain, as well as on distinct torture-like characteristics of BTCP which frequently separate them from relatives and friends and crowd them out of their lifes, and social peer groups. From a medical perspective, etiology, pathophysiology and pain characteristics are essential factors which - in combination with a variety of patient-specific factors - point the way towards highly individualized and beneficial therapeutic options. To detect affected patients in time, to secure access to innovative treatment approaches, to improve efficacy and tolerability, to secure patients rights and to maintain their autonomy with respect to quality- and quantity-of-life, the German Pain Association (a pain and palliative care physicians organisation) and the German Pain League (a nationwide active self-regulating community of pain patients), developed in close cooperation with pain and palliative care specialists, cancer pain patients and their relatives an evidence-based national BTCP treatment guideline as well as appropriate BTCP detection and treatment-algorithms for daily practice. Based on this fundament, continuing education courses, informative meetings, scientific sessions and cooperative workshops with patient and physician organisations were organized under the pari passu patronage of the German Pain Association and the German Pain League. As a consequence of these nationwide events, quality conformance analyses were able to confirm an increased awareness about BTCP among cancer, pain and palliative care specialists as well as nursing staff and other medical personnel.

Biography

Ueberall Michael A is the Director of the Institute for Neurological Sciences in Nuernberg, Vice-President of the German Pain Association and President of the German Pain League.

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