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Developing a Pain Control Plan

Cancer pain is a personal experience and different for every person who has a cancer diagnosis. A plan to control pain needs to take into account a person's diagnosis, type and stage of cancer, other health problems, medications being taken, personal response to pain, and other personal choices.

Remember that only you know how much pain you are having. Telling your cancer care team when you're in pain, and describing it the best way you can, is very important because pain is easier to treat when it first starts. Pain can also be an early warning sign of the side effects of your cancer treatment or some other problem. Together, you and your cancer care team can talk about how best to treat your pain. **You have the right to be treated for cancer pain, and you should insist on it.**

Learning about cancer pain

Here are some things that might help you talk about pain with your cancer care team.

- Understand [what causes cancer pain](#)¹.
- Know about [different types of pain](#)² and how each type is treated.
- Learn about [opioid pain medicines](#)³ and [other medicines to manage pain](#)⁴.
- Learn [how pain medicines are given](#)⁵
- Learn about [other medical treatments](#)⁶ and [non-medical ways to help manage pain](#)⁷.
- Know how to take your medicines safely.
- Work with your doctors, nurses, and pharmacists to develop a pain control plan.
- Talk with your cancer care team about your pain and how well your pain treatment plan is working.

What you can expect from your cancer care team and pain control plan

Your cancer care team has certain responsibilities and a set of steps they follow to develop a pain control plan that works best for you. You should expect your doctor and cancer care team to do the following to develop a good pain control plan that works for you.

- Believe your descriptions of pain.
- Take a careful history of your pain (called a **pain assessment**) after you report it and at every appointment.
- Do a physical exam or other tests to understand the location and possible cause of the pain
- Set goals about your pain based on how bad it is and what medicines you are willing to try.
- Treat your pain based on the most recent research (called **pain management**).
- Talk to you about how the pain control plan is working and make changes as needed.

Pain assessment

The first step is for your cancer care team to talk with you about any pain you may be having. This is called doing a pain assessment. Your doctor or cancer care team should ask about your pain during your appointments. You need to be able to describe your pain to your cancer care team, and to give them a history about it. They can ask you questions and use certain tools that will help you use the right words so they know the type of pain you may be having, how bad it is, and how it may be affecting your activities and life. Your family or friends can help you talk about your pain, if you're too tired or in too much pain to talk yourself.

Use a pain rating scale

Using a pain scale or another tool is a helpful way to describe how much pain you're feeling. For example, here is a Pain Intensity Scale that is commonly used. To use it, you should, try to give your pain level a number from 0 to 10. If you have no pain, give it a 0. As the numbers get higher, they stand for pain that's getting worse. A 10 means the worst pain you can imagine. For instance, you could say, "Right now, my pain is a 7 on a scale of 0 to 10."

0 1 2 3 4 5 6 7 8 9 10

No pain

Worst pain

You can use the rating scale to describe:

- How bad your pain is at its worst
- What your pain is like most of the time
- How bad your pain is at its best
- How your pain changes with treatment

Some pain rating scales use faces instead of numbers, and these may help you better describe how bad your pain is. Ask your cancer care team if they have another pain rating tool to use if you don't think numbers are the best way to describe it.

Give your cancer care team and your family and friends details about your pain

- Where you feel pain
- What it feels like (for instance, sharp, dull, throbbing, gnawing, burning, shooting, steady)
- How strong the pain is (using the 0 to 10 scale)
- How long it lasts
- What eases the pain
- What makes the pain worse
- How the pain affects your daily life
- What medicines you're taking for the pain and how much relief you get from them

Your cancer care team may also need to know other details, like the ones listed here.

- All the medicines you're taking now, including vitamins, minerals, herbs, supplements, and non-prescription medicines
- The pain medicines you've taken in the past, including what has and has not worked for you
- Any known allergies to medicines, foods, dyes, or additives

Pain Management

After a pain assessment, your cancer care team will work with you to find medicines and

other ways to control or manage your pain. Making a decision about the best way to manage pain is based on how you have described your pain and how you have answered other questions. Choosing the best pain medicine should take into account what medicines work best for the type of pain you have and how bad it is, what side effects are possible, your activity level, and what other medications and treatments you are getting.

Questions you may want to ask about pain medicine include:

- What kind of pain medicine is this?
- Do I need a prescription for this medicine? Is there a refill or do I need to call you for a refill?
- What are the different names for this medicine?
- How much should I take? (What's the dose?)
- Do I take it on a regular schedule or only when I need it? If only when I need it, how often can I take it?
- How do I take it?
- If my pain is not relieved, can I take more? If so, how much?
- Should I call you before increasing the dose?
- What if I forget to take it or take it too late?
- Should I take the pain medicine with food?
- How much liquid should I drink with the medicine?
- How long does it take the medicine to start working?
- Is it safe to drink alcohol or drive after I've taken this pain medicine? What should my limits be while taking it?
- What other medicines can I take with the pain medicine?
- What medicines should I stop taking or not take while I'm taking the pain medicine?
- What are possible side effects from the medicine? How can I prevent them? What should I do if I have them?
- Are there other safety concerns about this medicine?

Palliative care as an option

Certain patients are helped by services from a [palliative care](#)⁸ team. A palliative care team has some of the same people on a cancer care team, but usually has others, including doctors, nurses, mental health specialists, social workers, chaplains, pharmacists, and dietitians. One of the goals of palliative care is to manage pain and other symptoms. The specialists that are part of a palliative care team

can help to develop a pain control plan that works for you.

Making the most of your pain control plan

To help make sure your pain control plan works well:

- If you're taking pain medicine on a regular schedule (around the clock) to help control chronic pain, take it when it's time to take it, even if you're not having pain.
- Do not skip doses of your scheduled medicine. The more pain you have, the harder it is to control.
- Use your short-acting breakthrough pain medicine as instructed. Don't wait for the pain to get worse – if you do, it can be harder to control.
- Be sure only one doctor prescribes your pain medicine. If another doctor changes your medicine, the two doctors should discuss your treatment with each other.
- Don't run out of pain medicine. Remember that written prescriptions are needed for almost all pain medicines – they can't be called in and drugstores don't always have them in stock. It can take a few days to get the medicine, so give yourself time for delays. Sometimes you may need to pick up a prescription from the doctor because certain pain medicine prescriptions have to be taken in person to the pharmacy.
- Store pain medicines safely away from children, pets, and others who might take them.
- Never take someone else's medicine. Medicines that helped a friend or relative may not be right for you.
- Do not use old pain medicine or medicine left over from other problems. Drugs that worked for you in the past may not be right for you now.

Keep a record of your pain

You may find it helpful to keep a record or a diary to track details about your pain and what works to ease it. You can share this record with those caring for you. This will help them figure out what method of pain control works best for you. Your records can include:

- Words to describe the pain (like sharp, dull, throbbing, gnawing, burning, shooting, steady)
- Anything that seems to make the pain better or worse

- Any activity that you can't do because of the pain
- The name, dose, and time you take your pain medicines
- The times you use [other pain-relief methods](#)⁹ (such as relaxation techniques, distraction, or imagery)
- The number you rate your pain at the time you use a pain-relief measure (medicine or method to reduce pain)
- Your pain rating 1 to 2 hours after using the pain-relief measure
- How long the pain medicine works
- Your pain rating throughout the day (to get an idea of your general comfort)
- How pain interferes with your normal activities, such as sleeping, eating, sex, or work
- Any side effects you have that could be from the medicines

You can print out a [Pain Diary](#)¹⁰ from our website, or call us to have it mailed to you.

Hyperlinks

1. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/facts-about-cancer-pain.html
2. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/facts-about-cancer-pain.html
3. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/opioid-pain-medicines-for-cancer-pain.html
4. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/non-opioids-and-other-drugs-to-treat-cancer-pain.html
5. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/how-pain-medicines-are-given.html
6. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/other-medical-treatments-for-cancer-pain.html
7. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/non-medical-treatments-for-cancer-pain.html
8. www.cancer.org/treatment/treatments-and-side-effects/palliative-care.html
9. www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/pain/non-medical-treatments-for-cancer-pain.html
10. [/content/dam/cancer-org/cancer-control/en/worksheets/pain-diary.pdf](http://content.dam.cancer.org/cancer-control/en/worksheets/pain-diary.pdf)

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