Overview of Implantable Devices Gordon A. Beardwood, MDDABA

LEARNINGOBJECTIVES

Define chronic pain

+ Describe the prevalence and cost of chronic pain

+ Review nociceptive, neuropathic, and mixed pain types

+ Discuss implantable pain therapies for chronic pain

* Review examples of chronic pain conditions treated with spinal cord stimulation (SCS) and targeted drug delivery (TDD)

Discuss the importance of patient selection including selecting appropriate patients, the role of the psychologist, and setting appropriate expectations

WHATISACUTE PAIN?

Commonly defined as the normal, predicted physiologic response to an adverse chemical, thermal, or mechanical stimulus associated with surgery, trauma, and acute illness!

Characteristics: Abrupt onset

Short-lived

Follows injury or near injury to tissue Specific biological cause

WHATIS CHRONIC PAIN?

Historical definitions of chronic pain include the following concepts

"It is not the duration of pain that distinguishes
acute from chronic pain, but more importantly, the
inability of the body to restore its physiological functions to normal homeostatic
levels"

Chronic pain may be commonly triggered by disease or injury Stress, environmental, and affective factors may contribute to the pain experience

Chronic pain continues when treatment stops

HOWPREVALENTIS CHRONIC PAIN?

100 million
Americans suffer from Chronic Pain

Institute of Medicine (US) Committee on Advancing Pain Research, Care, and Education. Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education, and Research. Washington (DC): The National Academies Press (US); 2011.

HOWPREVALENTIS CHRONIC PAIN?

29.1 Million suffer from Low Back Pain

National Center for Health Statistics. Health, United States, 2016: Hyattsville, MD. 2016: p.194 https://www.edc.gov/nchs/data/hus/hus/bus/6.pdf Accessed October 2018.

WHATISTHE ANNUAL COST OF CHRONIC PAIN?

Up to \$635 Billion Total \$19.8 Billion For Back Pain.

Institute of Medicine Report from the Committee on Advancing Pain Research, Care, and Education: Relieving Pain in America, A Blueprint for Transforming Prevention, Care, Education and Research. The National Academies Press, 2011

Stewart WF, Ricci, JA, chee E, Morganstein D. Lost productivity work time costs from health conditions in the United States: results from the American Productivity Audit. JAMA 2003;290(18):2443-2554.

WHATISTHE COST OF CHRONIC PAIN?

Costs of chronic pain may include:

Ongoing medical expenses Lost income

ost productivity Compensation payments Legal expenses

IMPLANTABLE PAINTHERAPIES

H\eurostimulation

Delivery of electrical stimulation to the spinal cord to inhibit or mask the sensation of pain

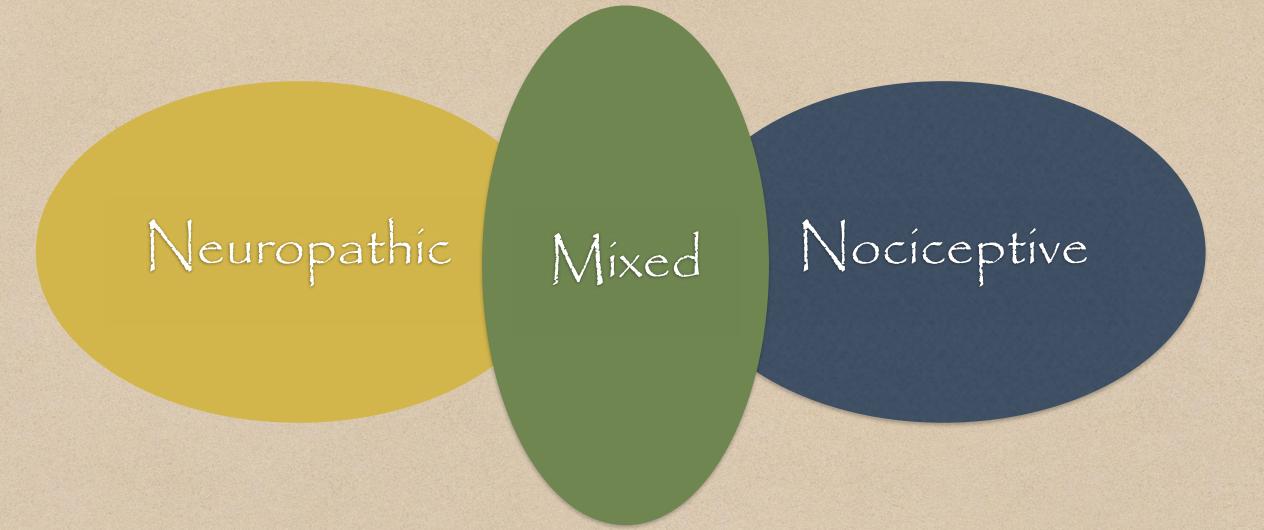
Spinal Cord Stimulation
Dorsal Root Ganglion Stimulation
Peripheral Nerve Stimulation

* Targeted Drug Delivery

Delivery of precise doses of prescribed medication directly into the cerebrospinal fluid (CSF) to modulate the transmission of pain signals

Microdosing Macrodosing

PAIN TYPES



NEUROPATHICPAIN

Associated with injury to the peripheral nervous system or the spinal cord Perceived as shooting, shock-like pain with severe burning or aching sensations

- H May have tingling, numbness, or itching
- Severe cases have a ripping or tearing sensation

Examples

 Complex Regional Pain Syndrome → Radicular leg pain

 ★ Epidural fibrosis

NOCICEPTIVE PAIN

Activated in response to tissue damage or inflammation arising from receptors sensitive to noxious stimuli

+ Somatic:Well localized, constant, dull, aching, throbbing + Visceral: Dull, vague and hard to localize

Examples

Compression fractures

Mechanical low back pain + Cancer pain

Warfield CA, Bajwa ZH. Principles and practice of pain medicine: 2nd ed., New York: McGraw-Hill:2004.

MIXEDNOCICEPTIVE AND NEUROPATHIC PAIN

Mixed pain is a complex condition with neuropathic and nociceptive characteristics

Pain perception depends on the condition

Examples

Failed Back Surgery Syndrome Some forms of cancer pain

EXAMPLES OF CHRONIC PAINTREATED WITH SCS OR TDD

Medical Condition	Spinal Cord Stimulation	Dorsal Root Ganglion Stim	Peripheral Stimulation	Intrathecal Pump
Failed Back Surgical Syndrome				
Degenerative Disc Disease				
Spinal Stenosis				
Radiculopathies				
Complex Regional Pain Syndromes				
Cancer Pain				
Peripheral Neuropathy (Alcoholic, Diabetic, Idiopathic)				
Abdominal and Pelvic Pain				
Peripheral Neuralgias				

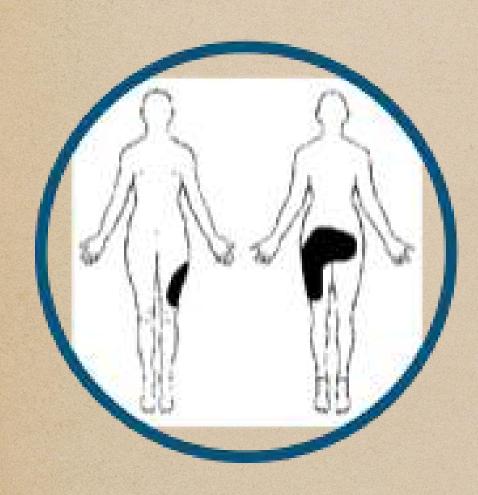
PATIENT SELECTION

Appropriate patient selection is critical for:

- + Patient safetu
- → Patient satisfaction
 - + Pain relief
- + Patient selection consists of:
 - + History and Physical Exam
 - + Psychological Evaluation
- + Documented individualized patient goals for therapy
 - + Patient and caregiver education

PAININTERVIEWANDPHYSICALEXAM

Determine pain pattern and intensity



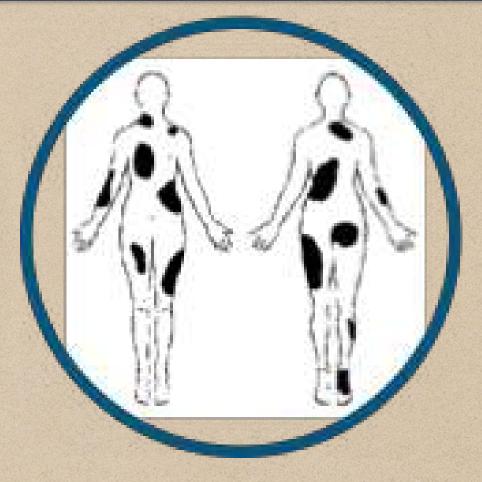
Simple pain pattern

Determine how pain affects quality of life

Situations or conditions that ease or exacerbate pain

Complex pain pattern

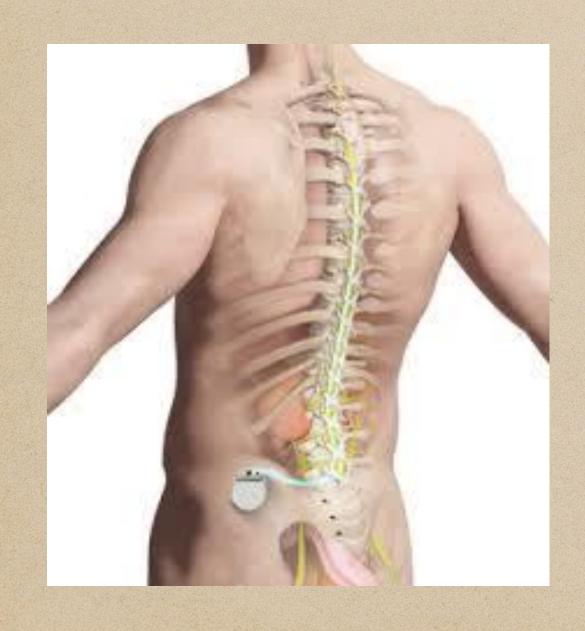
Multifocal Bilateral Referred Radiating



DOCUMENT THERAPY GOALS AND EXPECTATIONS

Express realistic expectations about what change may occur with improved function

Be able and willing to participate in a comprehensive treatment plan



Sufficient pain relief

Increased function

Decreased or elimination of systemic analgesics

Reduced side effects

Improved function or improved Activities of Daily Living

Increased range of motion, ambulation

With Targeted Drug Delivery for cancer patients, adequate pain relief may be only goal

THE PSYCHOLOGICAL EVALUATION

Helps reveal complex factors that contribute to pain

Establishes a baseline against which to measure improvement

Helps select the right treatment for managing the pain and related symptoms (e.g., fatigue, depression)

May increase the probability of a successful outcome by providing treatments that may resolve psychological risk factors

Identifies and treats psychological co-morbidities prior to therapy

Evaluates patient willingness, understanding, and competency to actively participate in their therapy

Provides insight into patient response during screening trial

- → Medicare and some other insurance carriers require a psychological evaluation for spinal and neural stimulation therapy
- → Pre-authorization may be mandated by some insurers

INTRODUCINGTHETHERAPYTOTHEPATIENT

- Discussion may take more than one visit

- Include patient's family and caregiver in discussion
 Give patient, caregiver, and family time to review patient video and brochure
 Answer questions about the therapy Make sure patient, family, and caregiver have realistic expectations about potential results
- + Establish and document specific therapy goals to compare against results + Stress that the goal of the therapy is not to eliminate pain but to meet established goals

PATIENT SELECTION & TRIAL

The overall goal for patient selection is to choose those patients most likely to experience therapeutic success while reducing the possibility of risks, complications and adverse events.

SUMMARY

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