

Comprehensive pain management: Advancements and best practices.

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Introduction

This review delves into the significant role of multimodal analgesia within Enhanced Recovery After Surgery (ERAS) protocols, highlighting how combining various pain-relief methods improves postoperative pain management, reduces opioid consumption, and accelerates patient recovery. The article emphasizes a balanced approach to pain control, moving beyond traditional opioid-centric strategies to enhance patient outcomes after surgery [1].

The article provides an overview of how regional anesthesia techniques, such as nerve blocks, significantly impact postoperative pain and overall patient outcomes. It discusses the benefits of these techniques in reducing opioid reliance, minimizing side effects, and promoting faster functional recovery following surgical procedures, contributing to improved patient satisfaction [2].

This systematic review examines the practice of opioid switching in patients experiencing cancer pain, detailing its efficacy and safety when managing inadequate analgesia or intolerable side effects. The review highlights clinical strategies for safely transitioning patients between different opioid medications to optimize pain control and improve quality of life [3].

This systematic review and meta-analysis evaluates the effectiveness of various nonpharmacological interventions for cancer pain management. It covers a range of approaches, including psychological therapies, physical activity, and complementary medicine, providing evidence for their role as adjuncts to pharmacological treatments in alleviating pain and improving patient well-being [4].

This narrative review summarizes recent advancements in the diagnosis and management of breakthrough cancer pain (BTcP). It discusses updated definitions, assessment tools, and therapeutic options, including rapid-onset opioids and non-pharmacological strategies, aiming to provide clinicians with current best practices to effectively address this challenging aspect of cancer care [5].

This review offers an update on spinal cord stimulation (SCS) for chronic pain, detailing current applications, technological advancements, and emerging concepts. It discusses how SCS can provide significant pain relief for various neuropathic conditions, highlight-

ing improvements in device technology and programming strategies that enhance therapeutic outcomes and expand its utility [6].

This review presents a concise summary of recent clinical evidence regarding dorsal root ganglion (DRG) stimulation as an effective treatment for chronic intractable pain conditions, particularly those localized to specific areas. It highlights DRG stimulation's targeted approach and its potential benefits for patients who have not responded to conventional therapies, improving both pain and functional status [7].

This narrative review explores the principles and benefits of multimodal analgesia in acute pain management, emphasizing the synergistic use of multiple analgesic agents and techniques to achieve superior pain control while minimizing opioid-related side effects. It outlines best practices for tailoring multimodal regimens to individual patient needs, crucial for optimizing recovery and patient satisfaction [8].

This systematic review analyzes the implementation and effectiveness of opioid stewardship programs in managing chronic non-cancer pain. It highlights strategies designed to optimize opioid prescribing practices, reduce risks associated with long-term opioid use, and promote safer, more effective pain management approaches for patients with chronic non-malignant conditions [9].

This systematic review evaluates the current evidence for using low-dose ketamine in the management of chronic pain. It discusses its mechanisms of action, clinical applications across various chronic pain syndromes, and considerations for administration and monitoring, providing insights into its role as an alternative or adjunctive therapy in complex pain regimens [10].

Conclusion

This collection of reviews highlights significant advancements and best practices in pain management across diverse clinical settings. A key theme is the crucial role of multimodal analgesia, particularly in Enhanced Recovery After Surgery (ERAS) protocols and acute pain management. This approach integrates various pain-relief methods to improve postoperative pain control, effectively re-

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duce opioid consumption, and accelerate patient recovery, moving away from traditional opioid-centric strategies. Regional anesthesia techniques, such as nerve blocks, also contribute significantly to better postoperative outcomes, reducing opioid reliance, minimizing side effects, and promoting faster functional recovery.

In the context of cancer pain, the literature explores multiple strategies. This includes the efficacy and safety of opioid switching for patients with inadequate analgesia or intolerable side effects, alongside comprehensive nonpharmacological interventions like psychological therapies, physical activity, and complementary medicine, which serve as crucial adjuncts to pharmacological treatments. Furthermore, recent advancements in managing breakthrough cancer pain (BTcP) focus on updated definitions, assessment tools, and therapeutic options, ranging from rapid-onset opioids to non-pharmacological strategies.

For chronic pain, the reviews detail innovative interventional approaches. Spinal Cord Stimulation (SCS) and Dorsal Root Ganglion (DRG) stimulation are presented as effective treatments for various neuropathic conditions, showcasing technological improvements that enhance therapeutic outcomes. Opioid stewardship programs are emphasized for chronic non-cancer pain, aiming to optimize prescribing practices and reduce risks associated with long-term opioid use. Additionally, the evidence for low-dose ketamine as an alternative or adjunctive therapy in complex chronic pain regimens is evaluated. Collectively, these studies underscore a comprehensive, patient-centered paradigm for pain management, integrating a wide array of pharmacological, non-pharmacological, and interventional techniques to enhance patient well-being and optimize recovery.

References

1. Matthew SK, James ED, Jason PH. Optimizing Postoperative Pain Management: *A Narrative Review of Multimodal Analgesia in Enhanced Recovery After Surgery Protocols*. *Curr Pain Headache Rep*. 2021;25(10):68.
2. Michael AE, Harsha N, Alopei RR. *Impact of Regional Anesthesia on Postoperative Pain and Outcomes*. *Anesthesiology Clinics*. 2020;38(2):281-295.
3. Sara R, Oriana C, Alessia A. *Systematic review of opioid switching in cancer pain*. *Expert Review of Clinical Pharmacology*. 2020;13(5):543-550.
4. Zhenyu S, Jing W, Qing L. Nonpharmacological interventions for cancer pain management: A systematic review and meta-analysis. *Medicine (Baltimore)*. 2020;99(36):e21820.
5. Sebastiano M, Augusto C, Daniele S. Recent Advances in the Management of Breakthrough Cancer Pain: *A Narrative Review*. *Cancers (Basel)*. 2022;14(10):2375.
6. Michael M, Christina MC, Michael LM. Spinal Cord Stimulation for Chronic Pain: *A Review of Current Practice and Emerging Concepts*. *Pain Ther*. 2021;10(1):19-37.
7. Nicholas M, Samit S, Liang KK. Dorsal Root Ganglion Stimulation for Chronic Pain: *A Review of Recent Clinical Evidence*. *Pain and Therapy*. 2020;9(1):15-30.
8. Saurabh S, Souvik M, Abhinav S. Multimodal Analgesia in Acute Pain Management: *A Narrative Review*. *Current Opinion in Anesthesiology*. 2021;34(5):609-614.
9. Elizabeth P, Jamie K, Lisa G. Opioid Stewardship in Chronic Non-Cancer Pain: *A Systematic Review*. *Journal of General Internal Medicine*. 2020;35(10):2996-3004.
10. Shaun M, Jonathan C, Brian K. Low-Dose Ketamine for Chronic Pain: *A Systematic Review*. *Pain and Therapy*. 2022;11(1):15-32.

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