

PAIN MANAGEMENT

Management:

Inadequate treatment of pain is widespread throughout surgical wards, intensive care units, and accident and emergency departments, in general practice, in the management of all forms of chronic pain including cancer pain, and in end of life care. This neglect extends to all ages, from newborns to medically frail elderly. African and Hispanic Americans are more likely than others to suffer unnecessarily while in the care of a physician and women's pain is more likely to be undertreated than men's.

The International Association for the Study of Pain advocates that the relief of pain should be recognized as a human right, that chronic pain should be considered a disease in its own right, and that pain medicine should have the full status of a medical specialty. It is a specialty only in China and Australia at this time. Elsewhere, pain medicine is a subspecialty under disciplines

such as anesthesiology, physiatry, neurology, palliative medicine and psychiatry. In 2011, Human Rights Watch alerted that tens of millions of people worldwide are still denied access to inexpensive medications for severe pain.

Medication

Acute pain is usually managed with medications such

medications such as ibuprofen, may provide some additional benefit. Ketamine can be used instead of opioids for short term pain. Management of chronic pain, however, is more difficult, and may require the coordinated efforts of a pain management team, which typically includes medical practitioners, clinical pharmacists, clinical psychologists, physiotherapists, occupational therapists, physician assistants, and nurse practitioners.

Sugar (sucrose) when taken by mouth reduces pain in newborn babies undergoing some medical procedures (a lancing of the heel, venipuncture, and intramuscular injections). Sugar does

not remove pain from circumcision, and it is unknown if sugar reduces pain for other procedures. Sugar did not affect pain-related electrical activity in the brains of newborns one second after the heel lance procedure. Sweet liquid by mouth moderately reduces the rate and duration of crying caused by immunization injection in children between one and twelve months of age.

Psychological

Individuals with more social support

cultures, extreme practices such as mortification of the flesh or painful rites of passage are highly regarded. For example, the Sateré-Mawé people of Brazil use intentional bullet ant stings as part of their initiation rites to become warriors.

Non Humans

The most reliable method for assessing pain in most humans is by asking a question: a person may report pain that cannot be detected by any known physiological measure. However, like infants, animals cannot answer questions about whether they feel pain; thus the defining criterion for pain in humans cannot be applied to them. Philosophers and scientists have responded to this difficulty in a variety of ways. René Descartes for example argued that animals lack consciousness and therefore do not experience pain and suffering in the way that humans do. Bernard Rollin of Colorado State University, the principal author of two U.S. federal laws regulating pain relief for animals,^[b] writes that researchers remained unsure into the 1980s as to whether animals experience pain, and that veterinarians trained in the U.S. before 1989 were simply taught to ignore animal pain. In his interactions with scientists and other veterinarians, he was regularly asked to "prove" that animals are conscious, and to provide "scientifically acceptable" grounds for claiming that they feel pain. Carbone writes that the view that animals feel pain differently is now a minority view.^[citation needed] Academic reviews of the topic are more equivocal, noting that although the argument that animals have at least simple conscious thoughts and feelings has strong support,

