NEWS YOU CAN USE JAN-FEB 2018

MAPPING THE ASSOCIATION BETWEEN VITAMIN D AND LOW BACK PAIN: A SYSTEMATIC REVIEW AND META-ANALYSIS OF OBSERVATIONAL STUDIES

- Vitamin D has anti-inflammatory and neuromodulatory properties, making study of its role in low back pain crucial.
- The mechanism through which Vitamin D is thought to affect back pain lies in its regulation of inflammatory markers and reduction of neuron excitability.
- The authors' review of existing studies found that patients with low back pain were more likely to have Vitamin D deficiency than those who did not have back pain. Additionally, in women who were less than 60 years of age, this association was stronger.
- The serum (blood) levels of Vitamin D was also found to be important as the more severe the deficiency, the more likely the patient was to experience back pain.
- Pain Physician 2017;20:611-640

WHAT THIS MEANS FOR YOU: If you suffer from low back pain, you should ask your provider to

check your Vitamin D level as this vitamin deficiency may worsen your back pain.

Alleviating the access abyss in palliative care and pain relief- an imperative of universal health coverage: the Lancet Commission report

- Of the 298.5 metric tonnes of morphine-equivalent opioids distributed in the world per year, only 0.1 metric tonne is distributed in lowincome countries.
- In most countries, access to immediate-release morphine for medical need is virtually non-existent.
- A few high-income countries such as Canada, United States and Australia far exceed this.
- An affordable, essential package of medications, medical equipment and human resources can help cover for most of the needs during serious health related suffering.

WHAT THIS MEANS FOR YOU: International collective effort is necessary to ensure that everyone throughout the world, rich or poor, have access to pain relief therapies during serious illnesses and end of life care.

The Lancet: 2017pii: S0140-6736(17)32513-8(Epub ahead of print)

Abuse-deterrent Opioid Formulations

- In 2015, 12 million people in the US used prescription opioids inappropriately
- The FDA has supported the development of Abuse-Deterrent Formulations (ADF) of opioids as one way to prevent people from using opioids in unintended and illegal

ways while maintaining the painrelieving properties of the medication

- ADF's use physical or chemical barriers to prevent mechanically changing or dissolving the medication through crushing
- ADF's can also add a blocking drug to the opioid that is only released to prevent the opioid from working if the medication is snorted or injected
- In 2015, 96% of all opioid prescriptions lacked ADF properties
- In 2013, Purdue Pharma replaced the original form of OxyContin with the ADF formulation that has a coating around the pill; when crushed and dissolved, this coating forms a gel that cannot be snorted or injected.
 Oxycontin is the most prescribed ADF.
- Insurance lack of coverage remains a barrier to widespread use
- In 2014, Massachusetts became the 1st state to require pharmacies to automatically substitute ADF's for other formulations and to require insurance companies to cover these without additional cost to patients.
- Georgia currently does not have an ADF law in place.

WHAT THIS MEANS FOR YOU: Abuse-deterrent opioid formulations may be prescribed as a way to decrease unintended and illegal use of opioid medications to help combat the opioid crisis; their insurance coverage in Georgia is variable.

Litman RS et al, Anesthesiology 2017

Emory Pain Center

550 Peachtree Street;7th floor. 404-686-2410