What are the ethical or legal issues surrounding pain management for patients? What roles and responsibilities do nurses have in patient pain management? In your opinion, what should be done to address some of the controversial aspects of pain management?

Legal and ethical issues encompass the many barriers there are for treating pain in individuals. Some identified by Carvalho et al. (2018) included a lack of accountability when pain is undertreated and the state and federal statutes that focus on fighting a drug and addiction war. Legal issues surrounding pain management for patients stem at one level from federal and state health policy. Each entity has had its own take on the prescription of pain medications. Furrow, Greaney, Johnson, Jost, and Schwartz (2015) added, conflict between the two on issues surrounding pain management for patients continues, especially due to concerns regarding neglecting to treat pain and abuse and addiction issues.

The Affordable Care Act (ACA) also brought light to the issue of pain management, forming a committee for federal research on this topic (Furrow et al., 2015). More training and education on pain management also resulted from the ACA, and Furrow et al. (2015) added that Medicare and Medicaid also issued standards for healthcare facilities in pain management as a quality measure. Pain is also one of the Quality Measures (QMs) for nursing homes (Furrow et al., 2015).

Ethically, it is an obligation for healthcare professionals to relieve pain (Carvalho et al., 2018). Healthcare providers, including nurses, must be both accountable and responsible in pain management because of the bioethical principles that need to be considered when caring for patients, which include autonomy, vulnerability, integrity, dignity, and justice (Carvalho et al., 2018). There are several responsibilities that come with that obligation ethically. These include

that additional pain and suffering beyond what is necessary cannot occur and everything possible, within the limits of current knowledge and resources, must be done to relieve pain and suffering in an individual (Carvalho et al., 2018).

In addition to being accountable and responsible as nurses and considering the bioethical principles, a nurse's role should also include being an advocate for patients in regards to pain management in addition to helping the patient identify and describe the pain. A patient's self-report is the most reliable indicator of pain (Lewis, Bucher, Heitkemper, & Harding, 2017). Patients who indicate pain should have it managed, though pain management and pain control typically have different meanings and outcomes to different individuals. Because of that, it is also important for a nurse to educate patients on pain and pain management. Nurses need to be educated themselves on pain and the management of it in order to best educate and help their patients. This education includes other modalities of managing pain that go beyond medications, including complementary and alternative therapies that are beneficial in pain management. Additionally, nurses need to be a voice for patients and pain management at the legislative level, including local, state, and national so that policies can align and allow better pain management regulations to be put into place.

For me, in regards to pain management, I feel one of the biggest issues is the idea most have that all pain can be resolved. Unfortunately, this is not possible. While healthcare providers do have that ethical obligation to do everything possible to manage pain, the key word is to manage. For some, resolution may not be part of the management. Additionally, to manage pain, multiple avenues must be taken to do so, which goes beyond pain medication. I feel there has been a lot of focus placed on using medications for the management of pain, perhaps because we have turned into a society that wants and thrives off of instant gratification or quick results. Pain medications may provide that, however, using other methods of pain management will allow for the pain to be managed for better and for longer periods of time once those options are given an opportunity to do so. I completely understand that this is difficult for those who have been living with chronic pain to fully accept and allow the time it may take for another therapy to work, such as massage or acupuncture. However, if one considers how his or her pain built up over time, it is also going to take time to start alleviating it.

Another group of patients I think of in regards to pain management are those who are post-surgical. Again, while I as I nurse wish I could take all of that pain away that they are experiencing, it is not possible in certain cases. In those who have had surgery, the body, skin and tissues, have been traumatized by surgery, and until that area is able to heal, there will be pain. In these cases too, so many want to turn to the use of pain medications to relieve all the pain. There needs to be better education on the importance of using other therapies to control pain as well as how pain is to be expected. We can certainly work to control and manage it, but our patients need to be better prepared that relieving it completely is not an option, but instead we work to manage it to a tolerable level.

I have been involved in various projects working on the opioid crisis, and while I am part of healthcare, I do believe healthcare played a huge role in the crisis we are seeing. As Dr. Andy McLean explained in a documentary on opioid abuse, healthcare cannot be fully blamed, however, many physicians will agree that the over-prescribing of prescription pain medications certainly fueled the crisis (Harris, 2017). Pharmaceutical companies assured those in the medical field that addiction to these pain medications would not occur, so between that and wanting to have patients satisfied with pain management, more and more prescriptions were written (Department of Health & Human Services [HSS], 2018). Before it was recognized that this was in fact incorrect, it was too late.

This demonstrates the huge need for education on pain management, for all healthcare providers and also patients. We all need to understand the multiple ways we can manage pain and that it does not always include pain medications, especially opioids. The term pain management also needs to be a part of that education as the key focus is the management of pain and not a cure or full relief. For me, a better awareness and more education can help us truly manage the controversial issue of pain management.

References

- Carvalho, A. S., Pereira, S. M., Jácomo, A., Magalhães, S., Araújo, J., Hernández-Marrero, P.,
 ... Schatman, M. (2018). Ethical decision making in pain management: a conceptual framework. *Journal of Pain Research*, *11*, 967–976. doi: 10.2147/jpr.s162926
- Furrow, B. R., Greaney, T. L., Johnson, S. H., Jost, T. S., & Schwartz, R. (2015). *Health law* (3rd ed.). St. Paul, MN: West Academic Publishing.
- Harris, J. (Producer). (2017). The opioid epidemic: Seeking solutions in North Dakota [Video File]. *Blue Cross Blue Shield of North Dakota Caring Foundation*. Retrieved from https://youtu.be/ngVPVmi4Ups
- United States Department of Health & Human Services (HSS). (2018). *What is the U.S. opioid epidemic?* Retrieved from https://www.hhs.gov/opioids/about-the-epidemic/index.html
- Lewis, S. M., Bucher, L., Heitkemper, M. M., & Harding, M. (2017). *Medical-surgical nursing: assessment and management of clinical problems* (10th ed.). St. Louis, MO: Elsevier, Inc.