

Abstract

This article explores critical insights into cancer pain management, focusing on achieving Comprehensive Pain Management (CPM) through inpatient specialized palliative care (SPC). Previous research primarily concentrated on outpatient settings, while limited data existed regarding the timeframe for CPM within inpatient SPC interventions led by multidisciplinary teams. Patient-reported outcomes (PROs) and objective pain score changes were assessed to gauge treatment effectiveness. The study revealed the necessity of continued research into CPM with SPC, is still much to learn [6,7]. A recent study sought to shed light on this crucial aspect of cancer care and to identify factors that influence the duration of treatment required.

Keywords: Cancer pain management; Comprehensive pain management; Inpatient specialized palliative care; Patient-reported outcomes; Multidisciplinary care; Clinicodemographic predictors; Personalized care plans; Patient-centered care

Introduction

Previous studies examining the duration required for alleviating cancer-related pain have primarily focused on outpatient settings, admittance to palliative care units or hospices, and weekly assessments [1,2]. Conversely, there is a lack of comprehensive data concerning the timeframe for achieving Comprehensive Pain Management (CPM) within the context of inpatient specialized palliative care (SPC) interventions led by certified palliative care physicians, advanced practice nurses, and a multidisciplinary palliative care team, which includes psycho-oncology physicians, pharmacists, medical social workers, rehabilitation specialists, dentists, and others. In light of the potential benefits of managing pain based on patient-reported outcomes (PROs) [3,4], such as enhancing quality of life, alleviating symptoms, and improving patient satisfaction, several studies have assessed pain reduction, rather than evaluating CPM in alignment with PROs. Moreover, the factors influencing the difficulty in achieving prompt CPM with SPC remain unidentified [5].

Continued investigation into the timeframe necessary to attain Comprehensive Pain Management (CPM) with Specialized Palliative Care (SPC), utilizing Patient-Reported Outcomes (PROs) and objective pain score improvements, is of paramount importance. This study was designed to assess the duration needed to achieve CPM through the provision of SPC services by inpatient SPC consultation teams and within palliative care units. Additionally, we explored clinicodemographic factors that may predict refractory cancer pain, necessitating an extended treatment duration.

Cancer pain is a complex and distressing symptom that significantly impacts the quality of life for patients facing this challenging disease. While there have been previous efforts to understand the time required to achieve Comprehensive Pain Management (CPM), the use of Patient-Reported Outcomes (PROs), and objective changes in pain scores, there

Importance of comprehensive pain management

Pain management in cancer care is not merely about providing relief from physical suffering. It encompasses a broader goal - improving the overall well-being and quality of life for patients.

Researchers collected data from a diverse group of cancer patients receiving inpatient SPC interventions. The multidisciplinary nature of the SPC team was a key feature, as it included certified palliative care physicians, advanced practice nurses, psycho-oncology physicians, pharmacists, medical social workers, rehabilitation specialists, dentists, and more. This holistic approach aimed to address pain from various

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angles, considering the physical, emotional, and social aspects.

Key findings

One of the central findings of the study was that continued research into the time required for achieving CPM with SPC, based on PROs and objective pain score changes, is crucial. The study revealed that achieving CPM is not solely a matter of pain reduction but also encompasses patient-reported outcomes. Therefore, a comprehensive approach to pain management is essential to improve the patient's overall well-being.

Predictors of refractory cancer pain: In addition to evaluating the time required to achieve CPM, the study also explored clinicodemographic factors that may predict refractory cancer pain. Identifying these factors is crucial for tailoring treatment plans and allocating resources effectively [12]. By understanding which patients are more likely to experience prolonged pain, healthcare providers can offer targeted interventions and support.

Implications for cancer care: This study underscores the importance of a multidisciplinary approach to cancer pain management, utilizing PROs as an essential component of assessing treatment effectiveness. It also highlights the need for personalized care plans, as some patients may require longer durations of treatment due to specific clinicodemographic factors. In conclusion, cancer pain management goes beyond mere pain reduction; it encompasses the patient's holistic experience. The study discussed here provides valuable insights into

