CASE STUDY ON PAIN MANAGEMENT IN ADDICTIVE DISORDERS
PAIN MANAGEMENT IN ADDICTION

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Internal Medicine - ABIM
Addiction Medicine - ASAM
Case Presentation

DP – 59 y o male sent to Addiction Medicine

- Escalating opioid use / ? “abuse”
- Chronic LBP / MVA age 24
- Imaging: Moderate DJD
PAIN MANAGEMENT IN ADDICTION

• DRUGS
• FAMILY
• MOOD
• TREATMENT
Drugs

- Teens: MJ and alcohol. No IVDU
- 20’s: 4 yrs. smoking opium Vietnam – Home - MVA
- 20’s-30’s: 10 yrs IV Heroin (2yrs prison – 2 yrs rehab.)
- 30’s-40’s: Cocaine/ Cocaine – Heroin
- 40’s: 15 yrs. escalating oral opioids – Vicodin, Norco
  PCP / UCC / ED’s / Street
Family:
• Father – Alcoholism
• 3 brothers – Alcoholism / drugs
Mood:
• Variable periods of depression
• No SI / attempts / no mania
Treatment

- NSAIDS, Opioids, Tricyclics, SSRI’s
- Physical Therapy
- Epidural steroid injections
Management

Non-opioid

Opioid: MS / methadone/buprenorphine

What’s the answer??
Progress Note:
F/U appt. Patient states that he is feeling better than he has for years. Not groggy, and back pain controlled. However has sever HA 2 days ago and took 2 Vicodin. Filled a Rx for Vicodin #118 tablets, Weds of this week, in clear violation of this contract. Became defensive and loud when confronted with His behaviour that clearly violated the opioid contract signed by him only 1 wk ago. After shouting and denying and protesting, he again admits his addiction and states he understands need for structure and controls while taking his Suboxone and that all medications (controlled substances) are to be prescribed ONLY by med and I will terminate his RX here if he cannot adhere to the RX contract.

Has #15 2mg tabs of Suboxone at home. He will take 6mgs daily and see me on Monday. He will bring in the bottle of Vicodin with #116 tablets. I will then provide him with an additional RX for suboxone 8mgs, for 2-3wks. UDS now. RA MOnday, 7-24-06
Regimen

- Buprenorphine
- Venlafaxine (Effexor)
- Trazadone
- AA card
RESULTS REVIEW

MARC ALLEN KURZBARD MD
Mon Apr 28, 2008 9:30 AM Signed

Called patient to review recent test(s).

UDS at AM positive for MJ. States he did use x1 a party. Distressed, admitted to wife his relapse.

Had intended for patient to return to PCP for continued medications, but advised patient to book RA with me 1mo. To bring in his signed AA and NA card (states he is still attending 2x weekly).

I will review with him treatment options for future at next appt.
Quiz

Management of the triad
– Pain – Addiction – Mood Disorder
Thank You!