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TRANSDERMAL PAIN CREAMS ATTENUATE PAIN IN MILITARY (TRICARE) CHRONIC PAIN PATIENTS

Studies are showing that chronic pain development following severe trauma is increased with the use of opiates compared to other treatment options. The pain is significantly higher with poorer psychological outcomes with chronic opiate use. This is attributed, in part, to Opiate Induced Hyperalgesia (OIH), which actually can magnify the pain and increase pain upon discontinuation of the therapy and disruption of the Hypothalamic Pituitary Gonadal (HPG) axis and the Hypothalamic Pituitary Adrenal (HPA) axes. These effects can cause downstream disruption of physiologic functions and contribute to comorbidities not normally recognized as a complication of opiate use. The efficacy of using personalized transdermal non-opiate based pain cream to manage pain in a population of military (TRICARE) chronic pain patients was assessed using a retrospective outcomes survey which examined pain levels, using the military’s Defense and Veterans Pain Rating Scale (0-10) and the use of oral pain medications before and at the end of therapy. The retrospective outcomes survey results showed that pain decreased from 6.6 before the beginning of therapy to 3.5 at the end of the therapy. Of this population, 87% indicated that their pain had improved with an average pain reduction in this population of 57% over the most recent 24hr period. In addition, 42% indicated that their use of oral pain medications had decreased. These results show that pain in a population of military chronic pain sufferers can be managed with personalized non-opiate based transdermal creams which can also lead to reduction in the use of oral pain medications.

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