# The Pharmacist And The Patient behind the Pain

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#### **Nishern Govender**

B.Pharm(Wits);M.Pharm(UKZN);PDG-Clin.Pharmacol.(UKZN);MPS(SA) Head of Medical and Scientific Affairs – South and Sub-Saharan Africa



Pain is a widespread global phenomena



93% of the world's population suffer with pain each year 1 in 3 of us are in pain every day

HALEON GPI 4 Global Report 2020

# Pharmacists continue to play a vital role in achieving everyday health with humanity



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# 9 out 10

of pharmacists agree that **the role of the pharmacist has evolved;** now requiring them to have greater expertise in influencing human behaviour and choices for self-care.<sup>1</sup>

## **91%** of pharmacists agreed that they

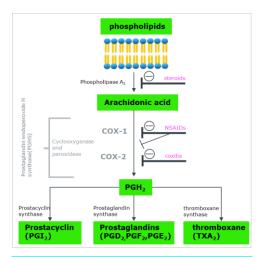
welcome more support with strategies for encouraging their patients to adopt new behaviours or influence behaviours in relation to their health and wellbeing.<sup>1</sup>

Haleon online survey of 376 community and retail pharmacists in the US, UK, Italy, Germany and Spain arried out 6th – 9th September 2022 by Vitreous World Pharmacist and Pain Management

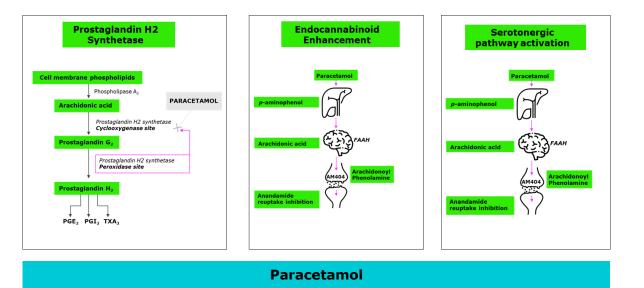
*Pharmacist's unique role and expertise* in the management of pain, needs to *enable* pharmacists and patients to have *uninhibited, personalised pain conversations.* 

## Pharmacology of Pain (OTC Analgesics)

## **Mechanisms of Action**



Non-Steroidal Anti-inflammatory Drugs (NSAIDs)



Przybyła GW, Szychowski KA, Gmiński J. Paracetamol-An old drug with new mechanisms of action. Clinical and Experimental Pharmacology and Physiology. 2021 Jan;48(1):3-19.



## "OTC" analgesics in pain management

				No pain relief
			Moderate-to-severe pain	STEP 4
		Mild-to-moderate pain	STEP 3	— Invasive and minimally invasive treatments
	Mild pain	STEP 2	— Strong opioid	invasive treatments
	STEP 1	— Weak opioid — <mark>± non opioid</mark>	— <mark>± non opioid</mark>	<ul> <li>e.g. neurosurgery, neuromodulation, nerve</li> </ul>
	— non opioid		(Paracetamol, NSAIDs)	blocks
	(Paracetamol, NSAIDs	(Paracetamol, NSAIDs) )	— ± adjuvant	
	— ± adjuvant	— ± adjuvant		

Weak opioids: Codeine; Strong opioids: Morphine, hydromorphone, oxycodone, fentanyl, methadone; Adjuvants: Steroids, antidepressants, anticonvulsants<sup>2</sup>

#### Reference

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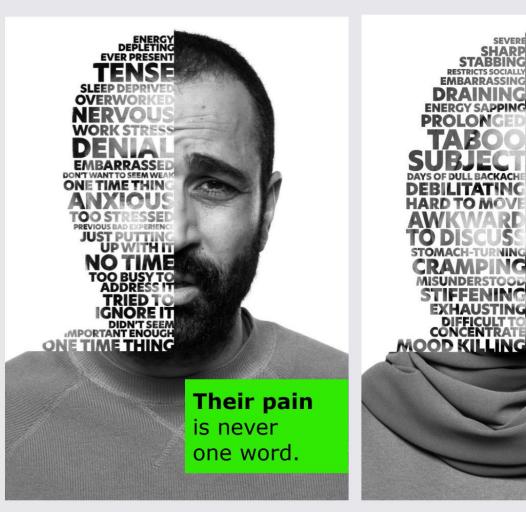
Yang J, Bauer BA, Wahner-Roedler DL, Chon TY, Xiao L. The modified WHO analgesic ladder: is it appropriate for chronic non-cancer pain?. Journal of pain research. 2020 Feb 17:411-7.

# Understanding the Patient behind the Pain

Their pain is never just one word

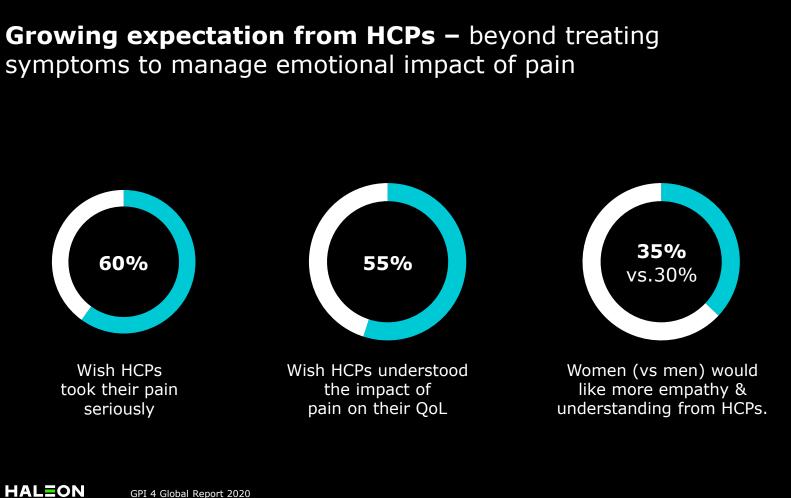
"An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage,"

IASP revised definition



**Their pain** is never one word.





## Lack of access is a global reality

% of people who ca	nnot easily, or not at a	
	UK	53%
	Sweden	53%
	USA	50%
	Poland	48%
	Germany	43%
	Canada	42%
Globally,	Australia	41%
,,	Malaysia	40%
38%	Italy	37%
cannot easily, or not	Brazil	36%
at all, access in-	Colombia	35%
person consultations	France	32%
with the	Mexico	32%
pharmacists /	China	29%
pharmacy	KSA	29%
assistants <	South Africa	27%
	Spain	26%
	India	23%

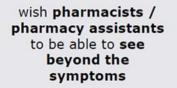
#### **21%**

of those who cannot easily, or not at all, access a pharmacist, feel that pain is not an aspect of their health that pharmacists care about, (doctors: 13%)

## **Patient expectations**











Wish more pharmacists / pharmacy assistants to be available to discuss all aspects of their pain



Wish pharmacists were trained better about how individual pain is for different patients.

### Negative experiences can be felt in a patient's treatment journey

# 53%



People ask for pharmacists to take pain like theirs more seriously



People in pain say they have been talked down to by an HCP when discussing their pain

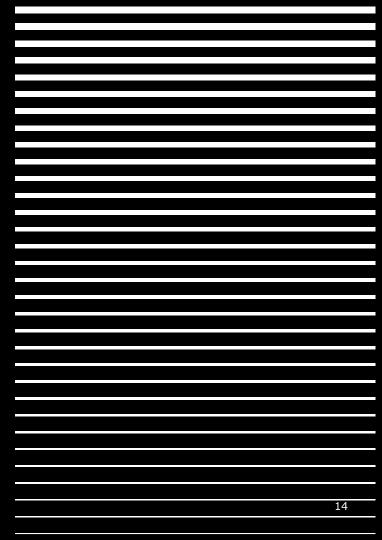


People in pain say they have been treated badly by an HCP when discussing their pain

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# A new approach in pain relief:

Resources for pharmacists



## **Profiles emerging from GPI**



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#### Pain Protocol



Adult Dental Pain Protocol A helpful quide for managing adult dental pain





Adult Headache Pain Protocol A helpful quide for managing adult headache pain





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Adult Low Back Pain Protocol A helpful quide for managing adult low back pain





Adult Migraine Pain Protocol A helpful guide for managing adult migraine pain

Download





A helpful guide for managing sore throat pain

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Fever Under 5 Pain Protocol A helpful guide for managing fever under 5 pain







Adult Musculoskeletal Pain Protocol A helpful guide for managing Adult Musculoskeletal pain



Adult Period Pain Protocol A helpful guide for managing adult period pain





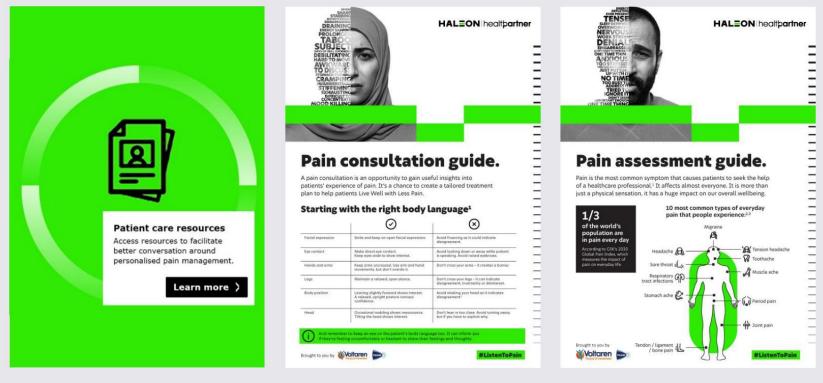
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## Provide a set of holistic tools for better

### interactions, assessment & outcomes



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## A guide to common OTC pain relief treatments.



With so many different options to choose from, this chart can help you recommend the most effective OTC pain relief.<sup>1</sup> The advice summarised in this chart is based on scientific evidence in current, published clinical treatment guidelines and peer-reviewed literature. It is designed to help determine the suitability of OTC options to relieve pain in adults only.<sup>1</sup>

#### **OTC Pain Relief Comparison Chart.**

Pain type	OTC analgesics		Supporting Evidence		
	Paracetamol	Topical diclofenac	Oral Ibuprofen		
Mild to Moderate Pain	Ø ₽n e2 @	 ₽1 & @ @ @	Ø	Oral paracetamol and ibuprofen are recommended first-line treatments by most guidelines. <sup>25,00</sup>	
Musculoskeletal (MSK) pain	⊘ ₽₽₽₩	Anticrocol pain of morecular congri C C C C C	Ø	The lotest systematic review of 11,000 participants demonstrates that topical diclofence is a witable, effective first line treatment for acute MSK pain, such as sprains and neck pain. <sup>278</sup> Paracetamol and topical diclofenac are recommended in patients with risk factors noted in chart.	
Osteoarthritis	Ø ₽2®	✐₽₽₽₽₽	Ø	Most guidelines recommend topical NSAIDs, including diclofenac, as the first line therapy. <sup>1374</sup>	
Headache (Tension Type Headache)	Ø ₽12€	⊗	Ø	Oral paracetamol and ibuprofen are both recommended as first line treatment for TH. The choice of therapy depends on patient risk profile. <sup>774</sup>	
Dental pain	IINSAIDs are contraindicated	$\otimes$	Ø	Oral ibuprofen is recommended as first-line therapy by most guidelines. A combination of ibuprofen and paracetamic or ibuprofen and than either drug alone. Paracetamal is recommended for patients with risk factors noted in chart <sup>ward</sup>	
Migraine	IINSAIDs are contraindicated	$\otimes$	$\odot$	Oral ibuprofen is recommended as first-line therapy by mark guidelines. Paracetamol is recommended for patients with risk factors noted in this table. <sup>37</sup>	
Dysmenorrhoea (period pain)	$\odot$	$\otimes$	$\oslash$	Oral ibuprofen is recommended as first-line therapy by most guidelines. Paracetamol is suitable in patients where NSAIDs are contraindicated or not tolerated. <sup>22,29</sup>	
Low back pain (of muscular origin)	⊗	© ⊕ ⊅ ⊛ M A	$\oslash$	Oral Ibuprofen is recommended as first-line therapy by most guidelines. <sup>24,25</sup>	

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## Assessing the risks.

#### What to look out for before recommending OTCs and NSAIDs for musculoskeletal pain

Pain is the most common reason for people to seek help from a healthcare professional.

OTC treatments can offer effective pain relief. But it's important to assess a patient for potential risks before making any recommendations.

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# Thank you

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## #ListenToPain