First Guidelines Issued for Treating Chronic Pain in People With HIV

Between 39 and 85 percent of the HIV population experiences chronic pain.

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Recognizing that 39 to 85 percent of those living with HIV suffer from chronic pain, experts have issued the first comprehensive guidelines on treating such suffering, Medscape reports.

There is a link between chronic pain and poor quality of life, as well as poor adherence to antiretroviral (ARV) treatment.

Publishing their guidelines in Clinical Infectious Diseases, a panel of 10 experts in HIV, pain, pharmacology, psychology, palliative care and addiction medicine reviewed medical literature published between 1966 and 2016. Officially, the guidelines came from the HIV Medicine Association (HIVMA) of the Infectious Disease Society of America (IDSA).

The recommendations apply to the treatment of musculoskeletal pain, including lower back pain or joint pain resulting from arthritis and nerve-related pain.

All people with HIV should be screened for chronic pain, the panel recommends, starting with two questions from a clinician: “How much bodily pain have you had during the last week?” and “Do you have bodily pain that has lasted for more than three months?”

If individuals say their recent bodily pain has been moderate or worse and they have experienced bodily pain for more than three months, the panel advises a thorough evaluation. This includes a physical exam, psychological evaluation and diagnostic tests.

A resulting comprehensive treatment plan should rely on clinicians and practitioners from multiple fields of expertise, who should work together to treat the individual—including pain specialists, psychiatrists and physical therapists. Nondrug therapy should be prioritized, such as cognitive behavioral therapy, yoga, physical and occupational therapy, hypnosis and possibly acupuncture.

Starting HIV treatment early in the course of infection, as is recommended by U.S. treatment guidelines, may prevent and treat some forms of nerve pain that are related to the virus, the experts state.

The panel strongly discourages prescribing opioids as a first option for treating chronic pain in this population, although such medications may be considered if other treatments have failed and the potential benefits outweigh the myriad potential harms, including addiction.

To read the Medscape article, click here (free registration with the site is required).

To read a press release about the study, click here.

To read the guidelines, click here.

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