

# Acute Pain Treatment Resources

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U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

# Helping Clinicians Better Address Acute Pain

Tools and guidance for selected common acute pain conditions:

- Website ([www.cdc.gov/acute-pain/index.html](http://www.cdc.gov/acute-pain/index.html))
- Training modules
- Videos
- Fact sheets



# Acute Pain Web Site



A screenshot of the website's main interface. At the top, it says "Acute Pain Treatment Recommendations" in large blue text. Below this, it prompts the user to "Select a category for current treatment recommendations from professional organizations." There are three categories shown with illustrations: "Acute Low Back Pain" (hands on lower back), "Acute Migraine" (hand on forehead), and "Ankle Sprains" (ankle with bandage). On the left side, there are social media icons for Facebook, Twitter, and an email icon.

A screenshot of the "The Situation by the Numbers" section. It features a bar chart with three bars of varying heights, representing data points. Below the chart, four large circular callouts display the numbers: 130, 68%, 218k, and 58. The text above the chart discusses the opioid crisis and clinical guidelines.

treatment for acute pain in nearly all cases, yet the practice persists. As a prescribing healthcare provider, you play an essential role in stemming the tide of the rising opioid crisis. Current clinical guidelines recommend effective alternatives that enable providers to adequately manage pain and minimize patient risk.

The Situation by the Numbers\*\*

130	68%	218k	58
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Provides an overview of topics along with statistics on overdose deaths and prescribing practices

\* Data featured on slide are for example purposes only

# Acute Pain Web Site (cont.)

Acute Low Back Pain Acute Migraine **Ankle Sprains** Dental Pain Postsurgical Pa >

Clinical Resource for Acute Pain Guidance > Ankle Sprains

## Ankle Sprains

Ankle sprains are a very common musculoskeletal injury, with roughly half of all patients experiencing this injury seeking medical care.!

+Show More

### Recommendation Summary

AMERICAN COLLEGE OF OCCUPATIONAL AND ENVIRONMENTAL MEDICINE

Opioids for Treatment of Acute, Subacute, Chronic, and Postoperative Pain (2017) <sup>1</sup>

"Routine opioid use for treatment of non-severe acute pain (e.g., low back pain, sprains, or minor injury without signs of tissue damage) [is not recommended]."

WASHINGTON STATE AGENCY MEDICAL DIRECTORS' GROUP

### Prescription Frequency

25%

25.1% of patients receiving ankle sprain care in an emergency department received an opioid prescription.

### Too Many Pills, Too Many Times

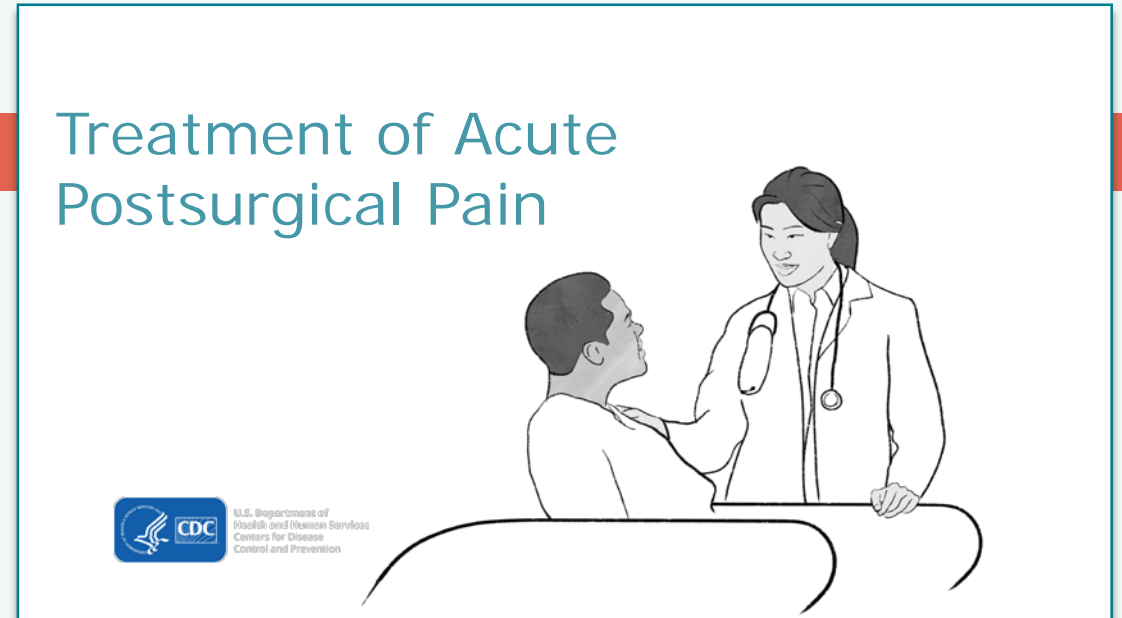
Opioids are prescribed for ankle sprains at a median total of 100 MME and an average of 3 days supply.

+ Footnotes

### Related Acute Conditions

- Provides recommendation summary for each topic
- Links to resources

# Training Modules



- Interactive training modules with an overview of published clinical guidance, patient scenarios and resources
- Providers can earn continuing education by completing the modules

# Videos



Dental  
Pain



Ankle  
Sprain



Low Back  
Pain

Videos provide recommendations from published guidelines for treating each of these types of acute pain

# Fact Sheets

**Acute Pain Management for Providers**

Acute pain, often defined as pain lasting 4 weeks or less, may be experienced by patients of all ages and a variety of different conditions. Decisions regarding pain management should be approached together with the patient, with the selection of a pain management strategy that optimizes benefits while minimizing risks.

The recommendation statements offered are intended to serve as a reference for providers in the management of acute pain. CDC reviewed and selected these recommendations from larger clinical practice guidelines based on their relevance to the acute pain condition of focus and the management of pain specifically in the acute setting.

**Avoid Opioid Therapy When Possible**

Long-term opioid use often begins with the treatment of acute pain. Even just three days of opioid treatment can increase the likelihood of chronic opioid use. However, acute pain can often be managed without opioids.

**Acute Low Back Pain**

Low back pain (LBP) is very common, causing more global disability than any other condition. LBP is frequently classified based on characteristics, including duration of symptoms. Acute low back pain is defined as lasting less than 4 weeks. Subacute low back pain is defined as lasting 4 to 12 weeks. Most patients with acute or subacute low back pain improve regardless of treatment. If a patient seeks treatment, providers should first consider nonpharmacologic treatments. These include heat, massage, and spinal manipulation to relieve pain.

If pharmacologic treatment is desired, providers and patients should consider nonsteroidal anti-inflammatory drugs (NSAIDs) or skeletal muscle relaxants.

**Ankle Sprains**

Ankle sprains are a very common musculoskeletal injury. Most patients seeking medical care for an ankle sprain will have their symptoms improve within 2 weeks, and nonopioid treatments like acetaminophen or ibuprofen are more effective than opioids in managing pain.

**Treating Postsurgical Acute Pain**

Opioids are often prescribed to manage severe acute postoperative pain, but recent studies show that patients often receive more than necessary. This may result in an increased risk of long-term opioid use, misuse, and overdose as well as the dangerous and illegal diversion of opioids to others.

Evidence-based clinical practice guidelines can aid providers and patients in making collaborative, safe, and effective decisions for treating pain.

CDC reviewed external research and existing published guidelines to provide a reference for the management of acute postsurgical pain. Cited recommendations represent current best practices as evaluated by CDC.

**Determining Need, Dosage, and Duration**

Decisions regarding pain management should be made collaboratively by the provider and the patient. Tailor strategies to the patient's pain management goals while taking into account risks versus benefits.

Use nonopioid treatment options such as NSAIDs or acetaminophen for acute postoperative pain. Only prescribe opioids if the pain is severe and the benefits outweigh the risks to the patient.

Non-pharmacologic therapies should be encouraged (e.g., ice, elevation, physical therapy).

**NON-PHARMACOLOGICAL THERAPIES**

- Ice
- Physical Therapy
- Elevation

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- Offers a quick reference for providers
- Includes additional resources