

FINAL OP-ED ON SB151 (Northern CA version)

Not long ago, I received a call from a cancer patient—I'll call him Bill—who had just been discharged from a hospital that morning. Bill had severe pain caused by a tumor pressing on a nerve and needed to get his pain medication prescription filled as soon as possible, but the hospital physician did not have the special triplicate prescription form that the state of California required for strong pain medications. Bill's daughter had to drive a long distance to pick up the triplicate prescription from his family doctor's office; she then had to go to two different pharmacies to obtain the medication. Later, Bill called me to report that he had obtained his pain medication. After four hours of suffering, he was finally starting to get some pain relief.

Fortunately for Bill and many of the 138,000 other Californians who will be diagnosed with cancer this year, a major improvement in pain management is here, thanks to the passage of Senate Bill 151 (Burton), co-sponsored by the American Cancer Society. This month, a new system for prescribing powerful pain medications (opioids such as morphine) takes effect, allowing patients to more easily obtain the pain medicines that they need.

Pain is a major problem for a significant number of cancer patients and for many others with chronic conditions. Approximately 50 to 70 percent of cancer patients experience uncontrolled pain at some point during their illness. Over 40 percent of cancer patients do not get adequate relief of their pain, despite the fact that medications and other therapies currently exist to relieve almost all cancer pain.

The prior system raised several challenges to managing pain and increased societal stigma against the use of morphine and other strong pain medications. Until SB 151 was signed into law, California had been one of only a few states in the nation to require the use of a triplicate prescription for the opioid pain medications. When physicians wrote these prescriptions, one copy was filed with the Bureau of Narcotic Enforcement at the California Department of Justice. This generated physician concern about being unfairly flagged as an "over-prescriber."

The new law, which eliminates the triplicate prescription requirements, is the result of years of effort by health groups and patient advocates to end the needless suffering that occurs when people in great pain are under-medicated. As in Bill's case, the required triplicate prescription forms had an adverse effect on health care providers' willingness and ability to provide appropriate pain management. Many physicians chose not to obtain triplicate prescriptions, leading to an increase in prescriptions for weaker, less effective pain medications.

To complicate matters, the triplicate prescriptions were valid for only 14 days and omissions or an error on the prescription could not be corrected by a phone call from the pharmacist to the physician. This resulted in a trip back to the physician's office by the patient or caregiver to obtain a new prescription and delays in obtaining the pain medication.

Under the new law, people with pain will have greater flexibility to obtain medication they need because their prescriptions will be valid for six months rather than two weeks. The prescription form required will be readily available to all physicians and the physician's office staff may assist in filling out the form.

Other barriers to effective pain management still exist, including myths held by patients and their families about standing strong in the face of pain, or worries about addiction. Physicians and other health care providers may play a key role in demystifying this integral area of health care by helping to educate and empower patients with the knowledge that they don't have to suffer. This cultural shift will take time, but SB 151 removes a major hurdle faced by people in pain and prescribers. Physicians are now able order these powerful pain medications to relieve pain using a new, more flexible and less complex prescribing system.

Beverly Nicholson, RN, CNS, AOCN is an oncology clinical nurse specialist at Mercy San Juan Medical Center in Carmichael, CA. She is the co-chair of the Professional Education Committee of the Northern California Pain Initiative (NCPI), a project of the American Cancer Society. NCPI is committed to promoting the right of all people to control their pain and maximize their quality of life.