

Innovations in cancer pain relief: technologies, ethics and practices

A research project based at the University of Sheffield, UK

Newsletter # 2 October 2003

Thank you to everyone who responded to the first newsletter which introduced our research project on the global development of innovative technologies for cancer pain relief since 1945, using sociological, historical and ethical perspectives. This work is being carried out in two phases:

1. A historical analysis of innovations in cancer pain relief since 1945.
2. Case studies of 'routes of administration', 'pain and the public', and 'pharmacogenetics'.

In this second issue we present an update on both phases of the project and we look forward, once again, to your interest and any ideas or suggestions you may have about this work.

Please feel free to forward this newsletter to others who may be interested in it.

This project is part of the U.K. Economic and Social Research Council/Medical Research Council Programme on Innovative Health Technologies (grant number L218252055).

New publication

Meldrum M (ed), *Opioids and pain relief: a historical perspective*. Seattle: IASP Press. 2003



Due to their dual nature, the role of opioids in pain management carries its own special burden. On the one hand, these powerful analgesics ease the suffering of chronic and severe acute pain; on the other hand, their abuse or overuse can lead to the degradation of body and mind. Public awareness of the usefulness and perils of opioid use is flawed, and consequently caregivers face special challenges in choosing opioid treatment options. No other class of drugs has such a rich history - one that reflects the best and worst in humanity. Much has been written about the history of opioids as addictive substances; however, this volume focuses specifically on their history in pain relief. It brings together contributors from different specialities who offer complementary

perspectives on the utility of opioids in treating pain. From medieval times to the 21st century, the history of opioid use is examined within scientific and social contexts. These insights illuminate the dualities of opioid use and suggest future options.

This new volume, edited by one of our project consultants, Dr Marcia Meldrum at the University of California, Los Angeles contains chapters presented at a symposium held at UCLA in August 2002, including a piece by David Clark, lead investigator on the project, entitled 'The rise and demise of the Brompton Cocktail'.

The so-called Brompton cocktail is a pain-relieving elixir that was championed by hospice innovators in Britain, taken up in many parts of the world, and then swiftly abandoned in the face of research evidence that questioned its efficacy and brought about its demise. This chapter identifies the clinical purposes that supported the Brompton cocktail and outlines how these came to be served by other approaches within the emerging hospice armamentarium. It also shows how a particular technology of care was disaggregated into a set of clinical, pharmacological, and practical problems through a series of studies conducted by one of the first research programs in modern palliative medicine.

Soon to be published

Winslow M, Clark D, Seymour J, Paz S, ten Have H, Meldrum M, Noble B, 'Changing technologies of cancer pain relief: Themes from the twentieth century', *Progress in Palliative Care* 11 (5), 2003

Paz S, Seymour J, 'Pain: Theories, Evaluation and Management' in Payne S, Seymour J, Ingleton C (eds.), *Palliative Care Nursing: Principles and Evidence for Practice*. For publication by Open University Press, March 2004

Conferences

Last July, Michelle Winslow gave a presentation at *Devices and Designs: Medical Innovation in Historical Perspective*, University of Manchester, hosted by the Society for the Social History of Medicine, the Economic and Social Research Council and the Wellcome Unit Manchester.

'Technologies of cancer pain relief 1945-2000: concepts, practices, voices' **Winslow M, Clark D, Seymour J, Paz S, ten Have H, Meldrum M, Noble B**

This paper presented five interconnected themes identified in the twentieth century history of cancer pain relief in the UK and the US: Opioid use and regulation; from surgery to pharmacology: cancer pain relief 1945 -1975; cancer pain concepts; cancer pain measurement; patients' narratives of cancer pain.

It was shown how clinicians, scientists, ethicists and social commentators have entered the 'space' of cancer pain; how the resulting conceptualisations have served to alter both public and private perceptions of cancer morbidity; and the differing causes and impacts of cancer pain relief innovations that originate in the laboratory, the clinic and the narratives of patients themselves.

A further presentation will be at the 5th European Social Science History Conference, Humboldt University, Berlin, 24-27 March 2004.

'The voice of experience: living with cancer pain'

Winslow M, Clark D, Seymour J, Paz S, ten Have H, Meldrum M, Noble B

The paper will survey a selection of narrative literature written by people with first hand experience of cancer pain, with the aim of shedding light on the changing nature of the cancer patient's voice from 1945 to the present day.

Future conferences that we are aiming to attend:

- European Association of Palliative Care, Stresa, Italy. 3-6 June 2004
- Palliative Care Congress, University of Warwick, 17-19 March 2004
- Royal College of Nursing, Annual International Nursing Research Conference, University of Cambridge, 21-24 March 2004

Expert Stakeholder Conference

The project team is currently planning an 'Innovations in Cancer Pain Relief' seminar, to take place in London on 9 March 2004. This meeting will bring together people with an active interest in cancer pain to comment and advise on the work of the project and invitations will go out shortly. Professor Karol Sikora has kindly agreed to chair the meeting.

Innovative Health Technology Fellowships

Jane Seymour successfully applied for an ESRC Innovative Health Technologies Fellowship which enabled a research trip in September to the Department of Ethics, Philosophy and History of Medicine at the University of Nijmegen, Netherlands, and the University of Leuven, Belgium. The visit included a meeting with Professor Ben Crul, anaesthetist and Professor of Pain Medicine, to discuss a project on moral dilemmas in terminal sedation.

Michelle Winslow has also submitted an application for an Innovative Health Technologies Fellowship. If successful, the Fellowship will enable travel to the University of California, Los Angeles, to extend the work of the project through work with Marcia Meldrum, project consultant, and her colleagues at the John C. Liebeskind History of Pain Collection.

Case Studies of Innovation

In the first phase of this project we have presented a historical overview of major themes in cancer pain relief in the twentieth century by exploring the interplay of regulatory, scientific, clinical, cultural and ethical dimensions. In the second phase we are considering contemporary debate and practice with a review of three major issues in the field of cancer pain relief in the world today.

1. The impact of changing routes of analgesic administration.

We are analysing key innovations such as the development of slow release formulations for morphine; transfer of infusion pumps from other medical specialties into palliative care; subsequent innovations in pump technology; the use of transdermal patches; and the rising importance of patient control and preference in formulation and marketing of technologies.

2. The potential for innovation resulting from pharmacogenetics.

The new field of pharmacogenetics has been hailed as a means of tailoring treatments to individual genetic profiles and enhancing the efficacy and safety of drug administration. However, there may be unintended implications in terms of clinical practice, ethical and social issues and this case study will explore how these are manifest in the field of cancer pain relief.

3. The extent to which cancer pain relief can still be addressed at the level of public debate and policy reform.

Exploring barriers to cancer pain relief across selected countries and from a variety of perspectives; including cultural, governmental, political and economic.

A history of the syringe driver



B.M Wright

Fiona Graham, a General Practitioner and associate of the project, has recently completed a MMedSci study on the development of the syringe driver. The case of the syringe driver offers insight into the place of technology in healthcare generally and this study seeks to broaden understanding of this innovative technology through an investigation of its history, invention, adoption and development within palliative care. Invented for the treatment of thalassaemia by Dr B.M Wright, the syringe driver was enthusiastically adopted by palliative care practitioners following pioneering use by Dr P.S.B Russell. Syringe driver practice has evolved over the last twenty-four years, along with ongoing debate about practical, ethical and economic factors involved in its use. The study found that literature on the syringe driver is unclear about whether the device or the route of administration is under consideration, and it lacks information on level of use and patients attitudes. Nevertheless, it was established that the future of the device is uncertain and that critical evaluation of syringe driver practice, and comparison with other methods of delivering continuous subcutaneous infusions, is a necessity.

The project is hosted by the Sheffield Palliative Care Studies Group, University of Sheffield, UK: <http://www.sheffield-palliative.org.uk>

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