Breakthrough Pain: Time to Change the Definition?

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In 1990 Portenoy and Hagan [1] defined Breakthrough Cancer Pain (BTCP) as “an episode of severe pain that “breaks through” a period of persistent pain at least partly controlled by a stable opioid regimen”.

This definition implies that BTCP is a condition that affects only to patients with cancer.

However, some authors have proposal the existence of the breakthrough pain (BTP) in patients with chronic severe pain from non-oncological diseases, that produce severe stable and burst episodes of pain, in a very similar way that we have seen in oncological patients [2-7].

In recent years, cancer has become a “chronic” disease, with either cancer cured long survivors even increased survival for metastatic patients due the results of advanced radio-surgical and systemic therapies under “personalized” protocols [8].

When BTCP was originally define, it was made in the understanding of a self-limiting condition of short duration. Today this is no longer can keep.

In these circumstances it is necessary an update of the definition of BTP, because this imply a more complex management since it’s possible than we can use the drugs in an intermittent way in the context of “multimodal analgesia”.

We propose the next simple definition: breakthrough pain is “an episode of severe pain that ”breaks through” a period of persistent pain at least partly controlled by a multimodal analgesia regimen”.

This definition implies that short or long-term effect opioids can be use, for the treatment of many patients that suffer for severe burst of pain instead a correct basal pain treatment, and can avoid possible secondary adverse events of the prolong treatments with opioids in a “dynamic” management in the very changing circumstances of any condition that can produce both: basal and burst pain [9].

Author’s Contribution
All the authors have contributed in the same way.

Disclosure
All the authors declare that have not any financial or other relationships that might lead to a conflict of interest.

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Bibliography


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