

Ways to reduce your pain without medications, part two

By Richard C. Shinaman, M.D.

In the face of an ongoing effort for state and federal governments to limit access to opioid containing pain relieving medications, a number of guidelines have been recently enacted that recommend that doctors prescribe less or even no pain medication. Many patients find that despite years of pain relief from pain medications, their doctors are suggesting that they stop their medication or even refuse to prescribe them anymore. Primary care doctors in particular have become very reluctant to prescribe any pain medication to even long-term patients.

Many patients want to know what to do and how they can treat the pain conditions that they have in light of these new recommendations and restrictions. All too often, we have found that a patient is asked to reduce or stop the amount of medication they are taking, but the doctor does not have enough time to review alternative

treatments that may replace the use of the pain medications that the patient relied upon in the past. The following are two of several options to alleviate pain without medications. I'll highlight additional options in future Lamorinda Weekly issues. I hope that the information below can be helpful to patients looking for ways to reduce pain from any number of pain-related conditions.

Vitamins and Supplements

Although the research is less clear about the long-term use of supplements, there are supplements that many physicians feel to be safe and potentially helpful for patients that suffer from chronic pain related conditions. In addition, many supplements and vitamins have a much lower side effect profile than more potent prescription medications. I don't think it makes good sense and is actually unhealthy to take a big handful of supplements each day, but certainly the targeted use of some vitamins, minerals, and herbs can really help with many conditions.

Current research shows that many of us become deficient in various micronutrients over the course of our lives. It is not clear if this is related to modern agricultural techniques, dietary deficiencies, or environmental exposure and everyone agrees that it is better to get these nutrients from whole foods rather than in a pill form. That said, adding a comprehensive high quality multi-vitamin may be a good way to ensure that you are getting high enough levels of various minerals and vitamins.

Vitamin D deficiency is a common source of musculoskeletal pain in older adults and various types of B vitamins can be used to treat pain related to nerve pain. Vitamin C is felt by some to have anti-inflammatory properties and some trials have shown promise with treating various diseases with moderate doses of Vitamin C. Curcumin or turmeric and refined fish oils can have relatively potent anti-inflammatory properties as well.

I often recommend my patients use L-carnitine and alpha lipoic acid together for any sort of neuropathy or even chemotherapy induced nerve damage. Melatonin and glycine can be used together to treat insomnia and is considered to be a much better choice than becoming dependent on sedative hypnotics like clonazepam or zolpidem. It is important to remember that supplements can have adverse effects as well so discuss any plans to use these supplements with your own doctor before starting them. I also caution readers that studies have shown many popular brands of supplements actually have very little of the active ingredients in the capsule. It pays to do your homework for which brands undergo purity and safety testing.

Sleep

Almost all of us are all too well aware how a poor night's sleep can wreck our ability to have a good day. Many Americans are chronically sleep deprived and ongoing sleep deprivation leads to higher circulating levels of stress hormones and pain generating neurotrans-

mitters.

One of the easiest things to do is to pick a consistent time to get up and to go to bed each day. While this may be difficult at first, over two to four weeks, this will generally result in better and more consistent sleep.

We often unintentionally set ourselves up for a bad Monday morning when we stay up late all weekend, sleep in, and then reset our internal clock just in time to need to wake up early for work or school at the start of the week. Just as important is the ability to avoid fixating on backlit screens leading up to bedtime. Most doctors believe that our constant attachment to bright LCD televisions, computer screens, and smartphones has greatly impacted our patient's ability to get restful sleep.

Poor sleep often goes hand in hand with no physical activity and spending limited time outdoors in natural sunlight. Several studies now have shown that if we are more physically active, we typically sleep much more soundly and also suggest that being outside or in sunlight during daylight hours produces more restful sleep after the sun goes down.

As suggested above, try and move around at least a little during the day and feel the sunshine if you can. If sleep is an issue, it typically over time will make your mood and any pain worse so rather than turning to prescription medication solutions, start with the above tactics first to try and turn things around.

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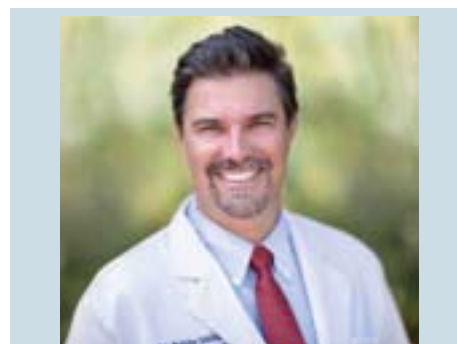
Dr. Sophia Scheffel, L.Ac has received both her masters and doctorate in acupuncture and Chinese Medicine. Dr. Scheffel has expertise in treating chronic pain; allergies, asthma and immune disorders; sleep, anxiety, depression and other mental emotional imbalances as well as oncology support.

She's a Lamorinda native, having graduated from Miramonte in 1998 and wanted to bring her practice back to the area in which she grew up to help her community attain optimal health.

Consider acupuncture and working with Dr. Scheffel to bring yourself into optimal health.



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Dr. Richard C. Shinaman, of Pain Medicine Consultants, is board certified in anesthesiology and pain medicine. Dr. Shinaman trained in anesthesiology and critical care medicine at Stanford University. He completed an accredited pain medicine fellowship at the Mayo Clinic. He has been a very busy and valued member of the medical community in Northern California for over a decade. His overall goal is to try and help people to suffer less and live more. He has published book chapters and a number of scientific articles on the treatment of painful diseases and how to treat them. More information can be found out about his current medical clinic at painmedicineconsultants.com. Most patients can request a consultation through the online web portal. His practice contact number is (925) 287-1256.

Non-invasive Testing to Diagnose Skin Cancer

By Christine Chung, MD

Mr. R is a 58 year old man with a history of recurrent basal cell carcinoma; in 2013 a dermatologist treated skin cancer on the right side of his nose by shaving off layers of skin in what is called Mohs surgery. Three years later, in 2016, Mr. R developed a basal cell carcinoma on the left side of his nose and got treated with radiation therapy. Recently, he noticed a new rough red spot on the left side of his nose. While concerned that it might be cancer, his immediate reaction was something many people can identify with: "Is there any other way to diagnose skin cancer without cutting off a piece of my skin?"

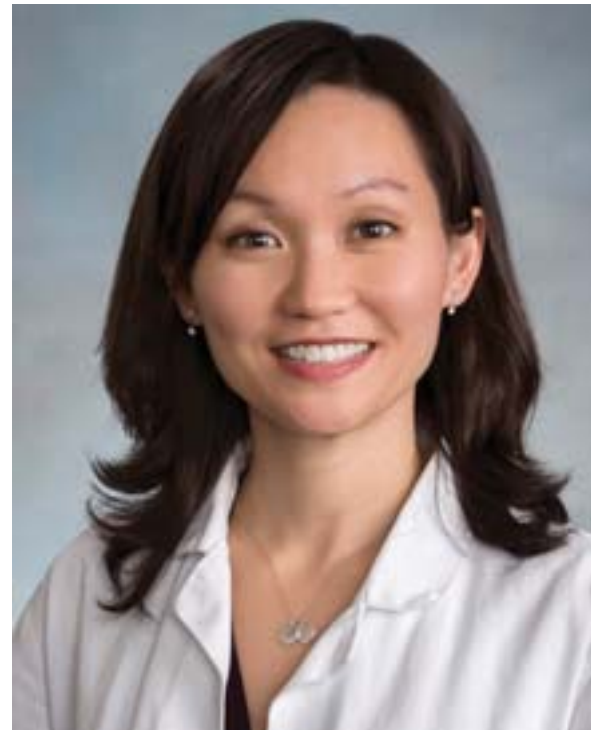
Basal cell carcinoma (BCC) of the skin is one of the most common malignancies diagnosed in the US, with over 4 million new cases each year. The lesions occur most frequently on sun-exposed skin in Caucasians, and people who have a history of BCC are at a higher risk of developing future lesions. BCC is associated with exposure to ultraviolet light from the sun, tanning beds, therapeutic radiation, or immunosuppression. BCC also occurs more often in men over 40 years old.

Basal cell carcinoma may be diagnosed by a doctor during a clinical examination, but a skin biopsy is usually done to confirm the diagnosis. Shave biopsies or punch biopsies are often performed, or lesions may be surgically removed for diagnosis. Unfortunately, the best way to diagnose skin cancer is by undergoing a biopsy.

Fortunately, researchers are developing less invasive methods for diagnosing skin cancers, such as Dermtech's Pigmented Lesion Assay, or PLA. This PLA test uses a sticky adhesive patch (similar to Scotch tape) to gather skin cells from a lesion. The sample is then analyzed for specific RNA molecules to diagnose melanoma, with a reported false positive rate of <1%. This test is available for the detection of melanoma, but the company is also developing a similar test for other skin cancers as well. Initial studies of this method showed promising results in identifying primary basal cell carcinomas and squamous cell carcinomas. For a patient, this would mean that instead of undergoing a procedure with a scalpel, the diagnosis could be made without any incisions at all.

To answer my patient's question: unfortunately, for now, the answer is no – biopsies remain the best method for diagnosing skin cancers. In the future, however, newer genetic tests may allow doctors to diagnose skin cancer non-invasively, without the need for scalpels or stitches.

Dr. Chung is a board certified radiation oncologist with Diablo Valley Oncology & Hematology Medical Group in Pleasant Hill. She has a special interest in treating skin and breast cancer. Dr. Chung sees patients in Pleasant Hill and Berkeley. For more information call: 925-677-5041.



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