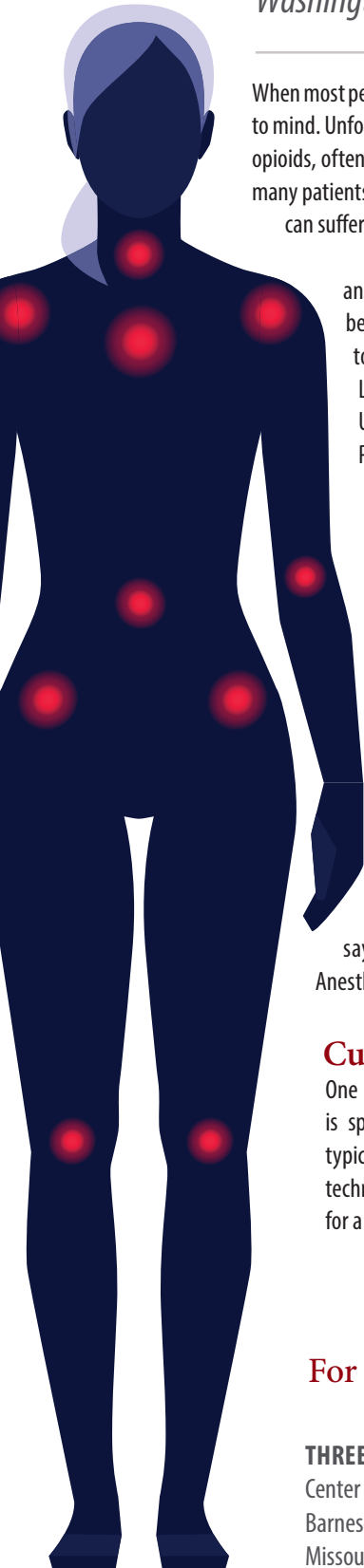


Pain relief with alternatives to opioid therapy

Washington University Pain Center offers a multimodal approach, cutting-edge therapies.



When most people think of pain management, opioids often come to mind. Unfortunately, too many patients become dependent on opioids, often with devastating consequences. This reality scares many patients away from pain management therapy, and people can suffer needlessly for years.

“We’re different. Our focus is to improve function and quality of life for our patients, and we don’t believe opioids are the only way to accomplish this,” explains Lesley Rao, MD, Washington University Anesthesiologist and Pain Management specialist.

Prospective patients are referred by their physicians to the Center. During an initial visit, the physicians and staff evaluate the patient’s pain, review life goals, and discuss the different therapies that are available. Treatment options include non-opioid medications, physical therapy, and psychological support, as well as newer therapies such as spinal cord stimulation and radiofrequency ablation.

“People think, ‘Pain management, oh, opioids,’ and we’re the opposite. We look at every other therapy option to alleviate pain and return people to their lives without opioids,” says Sade Oladapo, MD, Washington University Anesthesiologist and Pain Management specialist.

“Our focus is to improve function and quality of life for our patients, and we don’t believe opioids are the only way to accomplish these goals.”

Cutting-Edge Therapies

One of the greatest advancements in pain treatment is spinal cord stimulation, or SCS. This therapy was typically used as a last resort for patients, but recent technological advancements have made SCS appropriate for a broader range of patients.

“Due to the technological advances in SCS, we can help more patients much earlier in the process,” explains Rao.

SCS treatment can benefit patients with the following localized conditions: back and leg pain due to disc and degenerative back issues, peripheral neuropathy due to diabetes or chemotherapy, complex regional pain syndrome of an arm or leg, neck and arm pain due to problems in the neck, and pain due to nerve injury or lesions on the nerves of the arms or legs.

“We’re very excited that the advancements in SCS technology can provide long-lasting pain relief to more patients,” says Oladapo.

Patients with widespread pain, such as that associated with fibromyalgia or rheumatoid arthritis, are offered other therapies including cognitive behavioral therapy, physical therapy, and interventional treatment options, when appropriate.

Patients with joint pain in the spine, knees, or hips may be candidates for radiofrequency ablation. This treatment typically offers pain relief for six to 24 months and provides time for patients and their physicians to find additional treatment options.

“We have many different ways to help patients suffering from pain,” concludes Rao. “The options are more effective and advanced than ever before and are allowing us to move away from opioid-based treatment.”



Sade Oladapo, MD



Lesley Rao, MD

For more information, visit pain.wustl.edu

THREE ST. LOUIS AREA LOCATIONS:

Center for Advanced Medicine:	314-362-8820
Barnes-Jewish West County Hospital:	314-996-8631
Missouri Baptist Medical Center:	314-996-7200

 **Washington**
University in St. Louis

Physicians