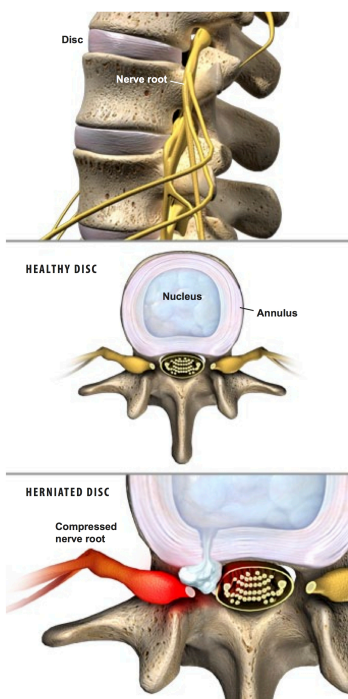


APC NEWS

HERNIATED DISCS



Overview

A herniated disc is a common injury that can affect any part of the spine. A herniated disc can cause severe pain and other problems in the arms or legs.

Disc Anatomy

Vertebral discs are flexible, rubbery cushions that support the vertebral bones. They allow the spine to twist and bend. Each disc has a soft inner nucleus that is surrounded by a fibrous outer wall.

Herniated Disc

A herniated disc occurs when the nucleus pushes through the outer wall. This herniation can result in a large bulge that can press against nearby nerve roots.

Causes

Herniated discs commonly result from age-related weakening of the spinal discs. This is called disc degeneration, and it can occur gradually over many years as a result of normal wear and tear on the spine. A herniated disc can also result from a traumatic injury, or from lifting a heavy object improperly.

Symptoms

Symptoms of a herniated disc vary depending on the location of the disc and the severity of the rupture. Some herniated discs cause no symptoms, and a person with this type of injury may not realize the disc is damaged. But a herniated disc can also cause severe pain, numbness or tingling, and weakness. Most herniated discs occur in the lower back, where they can cause symptoms in the buttocks, legs and feet. Herniated discs also occur in the neck, where they can cause symptoms in the shoulders, arms and hands.

Treatment

Treatment options for herniated disc depend on the location and pattern of the pain. Pain resulting from a herniated disc may be treated with pain-relieving medications, muscle relaxers and epidural injections. If the pain persists, a more targeting injection may be necessary. At APC, our highly trained physicians can help identify and treat pain associated with herniated discs, often eliminating the need for surgery.

What about that debate surrounding the definition of a slipped disc vs. a herniated disc? As it turns out, a slipped disc is actually just a colloquial term that is often used to describe a herniated or bulging disc. The intervertebral discs do not actually "slip" out of position. So while disc problems may certainly be to blame for your discomfort, your disc – at the very least – has not fallen out of place.



In This Issue

Herniated Discs

Millennials Down on Opioids

APC Staff News

Chronic Pain Social Support Group

eMTCP Music App

Medical Assistants Recognition Week

Pain Scale: Avoiding Two Pitfalls

APC in the Community

off the mark.com by Mark Parisi



To discuss treatment options and learn more about our diagnostic and state-of-the-art procedures, please call Augusta Pain Center at (706) 738-PAIN and make an appointment with one of our providers.



By Ed Coghlan

The Millennial Generation looks at opioids differently than their parents. The American Society of Anesthesiologists released a survey that said millennials are half as likely as baby boomers to turn to opioids to manage pain. Rather they use exercise, healthy eating, losing weight and overall wellness strategies.

But while the results reflect an anti-opioid trend, they also reveal a knowledge gap. The survey found many millennials were:

- More likely to obtain opioids inappropriately. One in 10 millennials obtained opioids through another household member's prescription, compared to 3 percent of Gen Xers, 1 percent of baby boomers and none of the silent generation.
- More likely to think it's OK to take an opioid without a prescription. Nearly 30 percent of millennials thought it was OK to take an opioid without a prescription, compared to 20 percent of Gen Xers, 12 percent of baby boomers and 3 percent of the silent generation.
- AND less likely to dispose of leftover opioids safely. In fact, 1 in 5 millennials said they "did not know" the best way to safely dispose of opioids, and only 37 percent were aware that a collection center at a local police station, hospital pharmacy or drug store was the best method of disposal.

"It's encouraging that millennials see the value of opting for safer and often more effective methods of managing pain," said ASA President Jeffrey Plagenhoef, M.D. "But clearly they are in need of further education when it comes to opioids and chronic pain because using the drugs initially to treat pain can turn into a lifelong struggle with addiction."

Seventy five percent of millennials say they have had acute pain (which comes on suddenly and lasts less than three months) and nearly 60 percent have experienced chronic pain (which lasts longer than three months). The source of that pain is reflective of millennials' lifestyle, including technology use (leading to eye strain, neck aches, hand or finger pain, wrist or arm pain), migraines and sports injuries.

Either there are no banners, they are disabled or none qualified for this location!

According to the survey, millennials (ages 18-36) and members of Generation X (ages 37-52) are most likely to report pain interfered with their work responsibilities, parenting abilities and participation in family activities. It's important to address pain before it interferes with quality of life by seeing the right specialist for pain management. Not surprisingly, the ASA says whatever the age, people in severe pain who don't find relief through lifestyle changes should see a physician who specializes in pain management, such as a physician anesthesiologist.

Coughlan, E. (2017, Sept 3). Millennials Down on Opioids [Blog Post] Retrieved from <http://nationalpainreport.com/millennials-down-on-opioids-8834307.html>

Living with chronic pain is like trying to get comfortable on a cactus sofa...



For patients in need of support, validation, and education in basic pain management and life skills (i.e. medication, treatment types, etc.), Augusta Pain Center offers a

CHRONIC PAIN SUPPORT GROUP

Meeting every 1st Friday 10:30a-11:30a & 3rd Monday 5:30p-6:30p
Please call to RSVP and check for cancellations.

APC STAFF NEWS

Work Anniversaries

Oct Cynthia Mayle 6 yrs;
Angela Bagrowski 2 yrs; Jan Phelps 1 yr

Nov Keona Johnson 2 yrs
Dec Lynda Henderson 8 yrs;
Dr. Nicholas DeAngelo 2 yrs;
Daniel Lucas 1 yr

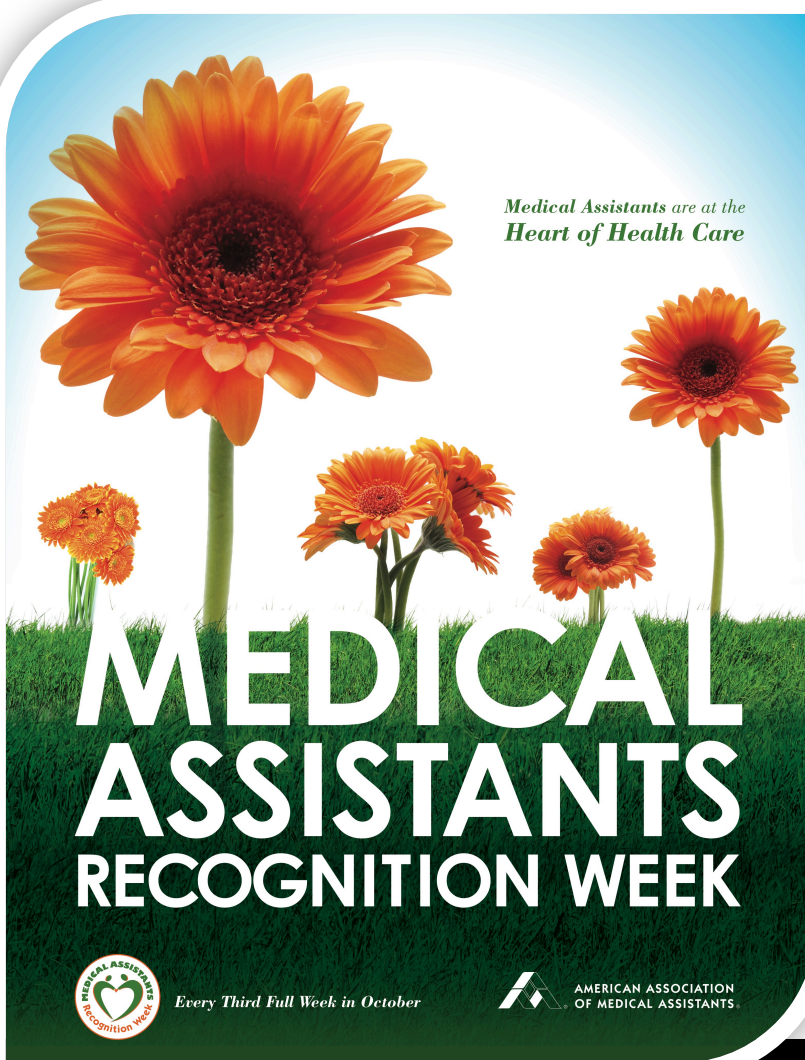
Birthdays

Oct Elizabeth Gilmer 10/7;
Tabbatha Lowery 10/8; Angela Bagrowski 10/12; Chris Scheuer 10/28

Nov Amanda Walker 11/18;
Jeanine Wethal 11/19;
Cynthia Mayle 11/22
Dec Charena Hill 12/7;
Natasha Edwards 12/11;
Danielle Williams 12/12

Using Music to Help Manage Pain
Research Group in Biomimetics
University of Malaga & American Chronic Pain Association

The positive effects of music therapy lessening chronic pain have been widely reported in the literature. However, there are no applications using music available for people to easily and effectively manage their pain on a daily basis. Recent research by Dr. Francisco Vico has resulted in health technology for providing interactive music therapy using the Smartphone as an input gathering device to estimate the patient's physiological state and deliver music that positively affects that state in real time. ACPA invites you to help them with this trial to better understand its usefulness of this app. eMT-CP is a music therapy app developed by a research group at the University of Malaga to help in the self-management of chronic pain. It can be used anywhere there is an internet connection: at work, on the road or at home - anytime you feel pain, and when you have problems falling asleep. The music has been designed by music psychologists to affect pain perception by drawing the mind away from the pain you are suffering, and helping you to relax when you are in bed.



PAIN SCALE

Learn what the 0 to 10 pain scale really means and how to use it most effectively so that your pain is taken seriously

00 PAIN FREE

01 **MILD**
Pain is very mild, barely noticeable. Most of the time you don't think about it.

02 **MINOR**
Minor pain. Annoying and may have occasional stronger twinges.

03 **UNCOMFORTABLE**
Pain is noticeable and distracting, however, you can get used to it and adapt.

04 **MODERATE**
If you are deeply involved in an activity, it can be ignored for a period of time, but is still distracting.

05 **DISTRACTING**
Moderately strong pain. It can't be ignored for more than a few minutes, but with effort you still can manage to work or participate in some activities.

06 **DISTRESSING**
Moderately strong pain that interferes with normal daily activities. Difficulty concentrating.

07 **SEVERE**
Pain that dominates your senses and significantly limits your ability to perform daily activities or maintain social relationships. Interferes with sleep.

08 **INTENSE**
Physical activity is severely limited. Conversing requires great effort.

09 **EXCRUCIATING**
Unable to converse. Crying out and/or moaning uncontrollably.

10 **UNSPEAKABLE**
Bedridden and possibly delirious. Very few people will ever experience this level of pain.

AVOIDING TWO PITFALLS

When rating their pain, the most common mistake people make is overstating their pain level. That generally happens one of two ways:

1 Saying Your Pain is a 12 on a Scale of 0 to 10
While you may simply be trying to convey the severity of your pain, what your doctor hears is that you are given to exaggeration and he or she will not take you seriously.

2 Smiling and Conversing with Your Doctor, Then Saying That Your Pain Level is a 10

If you are able to carry on a normal conversation, your pain is not a 10 - nor is it even a 9. Consider the fact that natural childbirth (no epidural or medication) is generally thought to be an 8 on the pain scale. Just as with the first example, your doctor will think you are exaggerating your pain and it is probably not nearly as bad as you say.



Richard S. Epter, MD, DABPM, FIPP
Medical Director
Nicholas A. DeAngelo, DO, DABPM
Physician
William S. Schiff, Psy. D.
Psychologist

1321 Interstate Parkway
 Augusta, GA 30909

Hours:
 Monday - Thursday
 7:00 am – 4:30 pm
 Friday
 8:00 am – 2:00 pm

Contact Us:
 (706) 738-PAIN (7246)
 Fax: (706) 738-7248

follow us on



Augusta Pain Center Quarterly Newsletter
 October 2017 Edition
www.AugustaPainCenter.com



APC in the Community

The Augusta Pain Center participated in the Georgia Power Employee Health Fair as well as the CSRA Expo at Fort Gordon in August. APC is a corporate member of the Association of the United States Army, Fort Gordon chapter.

Brooke Willis, the Marketing Director of APC, is the Steering Committee Chair for this year's Youth Leadership Columbia County class, which kicked off in August. 30 students from Columbia County were selected to attend the 10 month program designed to educate through experience and motivate young leaders and enable them to take an active role in their community.

