



Pain Management in the ED: Review of Available Therapies

**Edward A. Panacek, MD, MPH,
Professor of Emergency Medicine
University of California – Davis Medical Center**

Key Learning Points:

Emergency Physicians are encouraged to identify painful conditions and treat them early in the Emergency Department stay.

When ED patients present with moderate to severe pain, pain therapy via the intravenous route should be considered.

Pain management may be optimized through the use of combination therapies. Such an approach may also reduce the frequency of adverse drug effects if lower overall drug doses are required in order to achieve pain relief.

- The use of anxiolytics in the ED should be considered in that they may independently assist in the relief of pain, allowing for lower opioid doses to be utilized.

Dilaudid is a preferred drug for pain relief in ED patients over Demerol in that:

- It is potent in small doses.
- It is generally well tolerated.
- There are no active metabolites of this drug that accumulate between drug dosing.

Hydrocodone is a preferred drug for pain relief in ED patients over Codeine in that:

- It has a greater efficacy with less GI adverse effects than Codeine.
- It does not require Cytochrome P450 metabolism, which can be lacking in up to 15% of patients.

The complete handout of written materials available @ www.ferne.org