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2020 Virtual Advocacy Event

# The Best Ways To Describe Pain So Your Healthcare Practitioner Understands

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### Why is An Accurate Description of Pain Important?

**Table 1.**Leading Gastrointestinal Symptoms Prompting an Ambulatory Visit in the United States, 2014

		Estimated no. of annual visits		
Rank	Symptoms	Office visits	ED	Total
1	Abdominal pain	10,705,448	11,135,099	21,840,547
2	Vomiting	1,725,616	2,936,210	4,661,826
3	Diarrhea	2,423,825	994,454	3,418,279
4	Nausea	1,063,883	2,004,732	3,068,615
5	Bleeding	2,147,949	606,970	2,754,919
6	Constipation	1,086,452	511,317	1,597,769
7	Anorectal symptoms <sup>a</sup>	928,119	220,585	1,148,704
8	Heartburn and indigestion <sup>a</sup>	878,808	63,485	942,293
9	Decreased appetite <sup>a,b</sup>	564,112	94,685	658,797
10	Dysphagia <sup>a</sup>	537,975	88,731	626,706
Total	<u> </u>	_	_	40.718.455

Table 2.Leading Physician Diagnoses in the Ambulatory Setting for Gastrointestinal, Liver, and Pancreatic Disorders in the United States, 2014

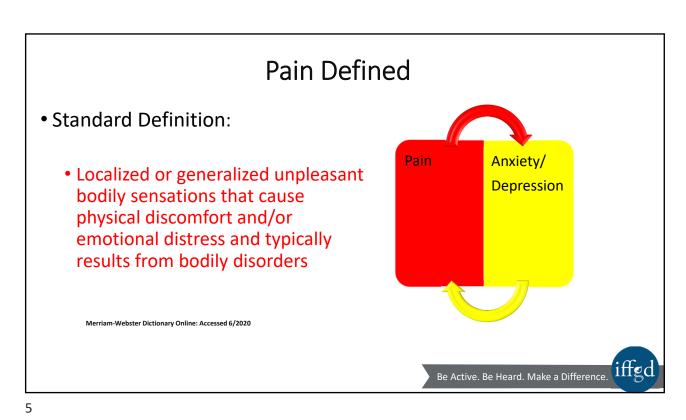
	Estimated no. of annual visits		
Diagnosis	Office visits	ED	Total
Abdominal pain	8,565,933		16,472,859
Gastroesophageal reflux	5,235,107	325,666	5,560,773
disease/reflux esophagitis			
Nausea and vomiting	1,935,544	2,943,220	4,878,764
Diarrhea	2,173,179	800,794	2,973,973
Gastritis and dyspepsia	2,398,740	462,065	2,860,805
Abdominal wall and	2,548,881	236,684	2,785,565
inguinal hemia			
Constipation	1,746,404	771,058	2,517,462
Hemorrhoids	2,237,642	246,623	2,484,265
Diverticular disease	1,748,508	172,462	1,920,970
of the colon			
Malignant neoplasm	1,621,053	28,852	1,649,905
of the colon or rectum"			
Cholelithiasis	1,126,944	466,832	1,593,776
Lower GI hemorrhage	1,269,312	191,724	1,461,036
Chronic liver disease	1,003,102	41,934	1,045,036
and cirrhosis*			
Ulcerative colitis*	935,150	21,953	957,103
Dysphagia*	861,769	43,172	904,941
Pancreatitis, acute	562,048	195,113	757,161
and chronic <sup>b</sup>			
Appendicitis <sup>b</sup>	523,524	212,046	735,570
Hepatitis C infection*	709,338	3643	712,981
Crohn's disease"	642,547	42,399	684,946
Irritable bowel syndrome®	585,061	18,638	603,699
Benign neoplasm	332,191	_	332,191
of colon and rectumab	,		
Barrett's esophagus*	274,482	_	274,482
Celiac disease <sup>a,b</sup>	190,381	_	190,381
Hepatitis, unspecified <sup>a,b</sup>	24,088	9775	33,863
Total	,,,,,,,		54.392.507
			- ,,,

Peery et al. Gastroenterology 2019;156:254-272.

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Discussion Pain With Your Practitioner

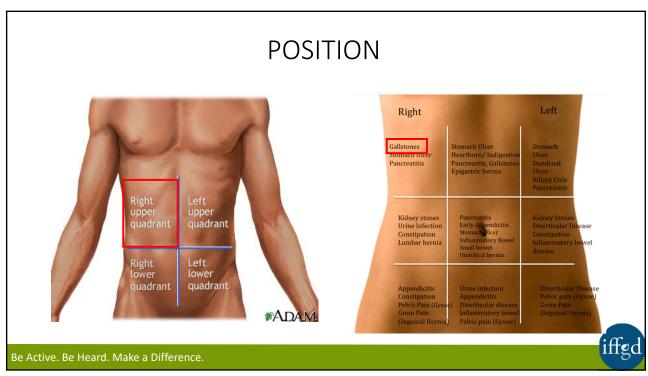
How may I help you?
Ok. Could you be a bit more specific?

Ym experiencing a lot of pain ?? What would you like to know??

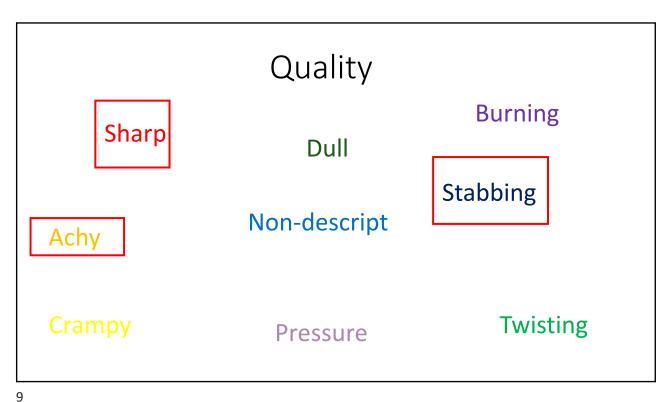
## The P, Q, R, S, T + E & A

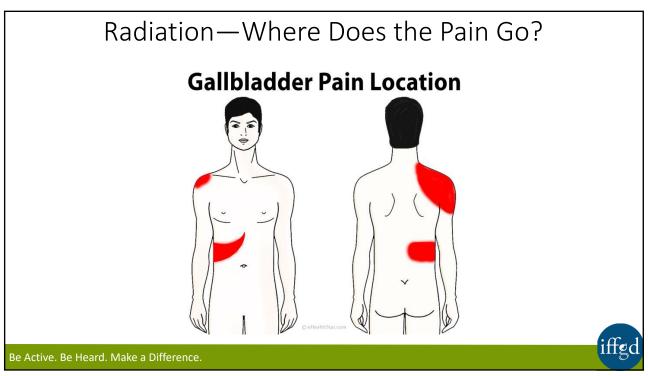
- Position
- Quality
- Radiation
- Severity
- Timing
- + Exacerbating & Alleviating factors

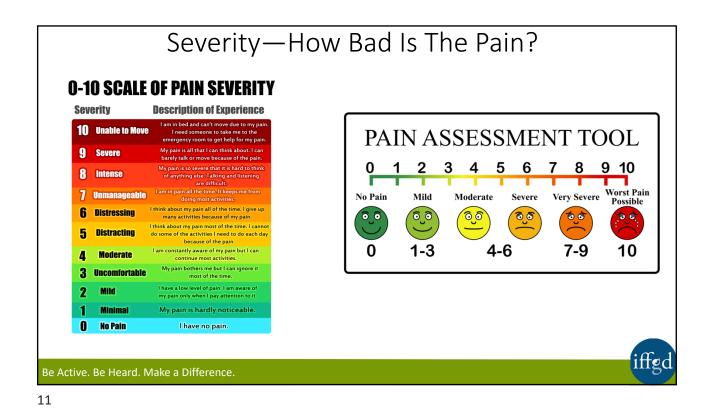
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Timing—When Does The Pain Occur?

Timing—When Does The Pain Occur?

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#### Exacerbating & Alleviating Factors

- What triggers the pain or causes it to be worse?
- What makes it feel better?
- Biliary Colic:
  - Exacerbating factors → Eating esp fatty foods/meals
  - Alleviating factors → Time

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#### Piecing It All Together

- Position → Right Upper Quadrant
- Quality→ Sharp-stabbing/Achy
- Radiation→ Center of chest/Rt back or shoulder
- Severity→ Worst first 30-60 min then decreases over next few hours
- Timing  $\rightarrow$  Usually after a meal (fatty foods)
- Exacerbating & Alleviating factors → Eating and time

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#### Don't Forget The Last Important Piece

# Quality of Life

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#### Summary

- Pain is both the most common symptom leading to a GI evaluation and the diagnoses made by GI practitioners
- A good history can help differentiate between the multitude of causes for abdominal pain
- Providing your practitioner with the PQRST + E&As may lead to an efficient diagnostic and treatment strategy
- Make sure you describe how the pain is impacting your quality of life.

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