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Helping to Manage Pain within Our Community

According to the National Center for Health Statistics, over 76.5 million Americans suffer from chronic pain.¹ Those affected by chronic pain have many therapeutic options, but what is the best approach? When should one treatment be tried over another? And where can you turn for resources and advice in treating patients with chronic pain?

At OAG Interventional Pain Consultants, we are dedicated to controlling the symptoms of chronic pain. OAG Pain physicians have provided comprehensive pain consultations and interventional pain treatments to the Portland and Southwest Washington community for more than 17 years. All of our physicians are board certified in both pain management and anesthesia which means we bring a thorough and unique understanding to the treatment of your patient's pain. We offer comprehensive consultations as well as the latest in diagnostic and therapeutic interventional pain procedures for



Front: R. Scott Brown, MD, Andrew Chiu, MD, Stuart Rosenblum, MD, PhD.

Back: Jason Mauer, MD, Mark Kallgren, MD, Mark Norling, MD

acute, chronic, cancer and pediatric pain management, so you can feel confident in referring patients to us.

Approaches to Managing Pain

A Tiered Approach

Physicians generally treat chronic pain patients using an algorithmic care paradigm known as the pain treatment continuum. According to the pain treatment continuum, physicians start with the least expensive and least

invasive treatments. If the patient doesn't respond well to the therapy or has become unresponsive to it over time, physicians will prescribe a more expensive or invasive option on progressing tiers of the continuum until a therapy or combination of therapies works.² Treatment options for patients fall under two main categories: conservative therapies and interventional therapies.

Conservative Therapies

Conservative therapies are predominantly non-invasive treatments and appear on the lower tiers of the pain treatment continuum. Conservative treatments range from minimally intensive options such as exercise programs, physical and psychological therapies, over-the-counter medications, and transcutaneous electrical stimulation (TENS) to moderately intensive options such as nerve block procedures and opioid medications.

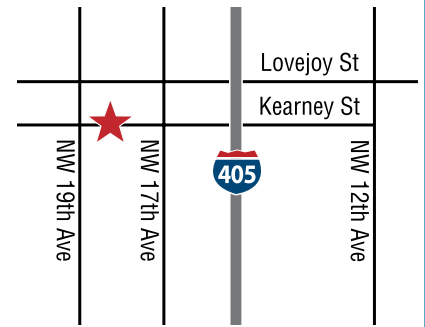
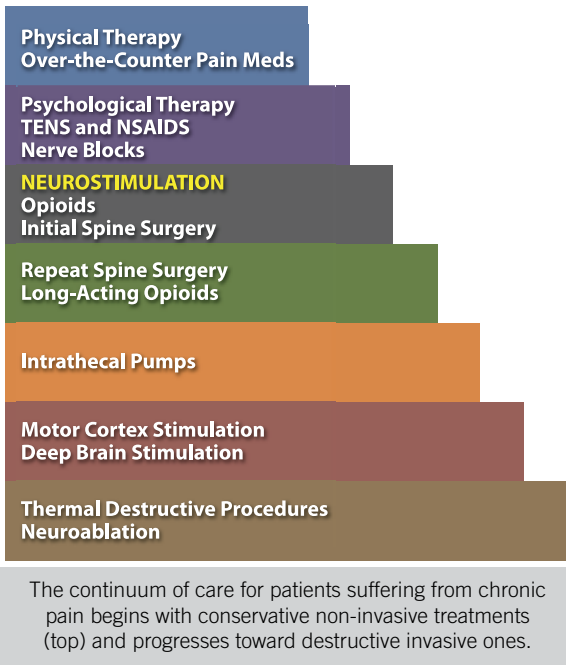
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Interventional Therapies

As a patient's pain resists conservative treatments or as patients become refractory to them, interventional procedures may be able to relieve the pain. Interventional therapies include surgery, neurostimulation, an intrathecal pump, and neuroablation. Of the aforementioned options, surgery and neuroablation are irreversible procedures.

The Best Medical Management

Various pain etiologies and each patient's unique physiology and psychological disposition toward pain complicate how physicians implement the best care. With our specialty knowledge and expertise, the OAG Pain Physicians can help to evaluate and treat your patients and we'll keep you informed every step of the way. We look forward to helping you provide your patients with the best medical management of their pain. To make a referral to one of our Pain Medicine physicians, please contact 503.517.3785 or visit us online at www.oagipc.com



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References

1. National Center for Health Statistics. Health, United States, 2006 With Chartbook on Trends in the Health of Americans. Hyattsville, Md.:68-71. Cited by: Pain Facts and Figures page. American Pain Foundation website. Available at: <http://www.painfoundation.org/page.asp?file=Newsroom/PainFacts.htm>. Accessed September 25, 2008.
2. Krames E. Spinal cord stimulation: indications, mechanism of action, and efficacy. *Curr Rev Pain.* 1999;3(6): 419-426.

While our practice treats both acute and chronic pain conditions, the most common pain disorders that we encounter are:

- ◆ Low Back Pain
- ◆ Head and Neck Pain
- ◆ Neuralgia (including Shingles and Diabetic Neuropathy)
- ◆ Musculoskeletal Pain
- ◆ Arthritis
- ◆ Post-Trauma or Surgical Pain
- ◆ Rib Fracture Pain
- ◆ Complex Regional Pain Syndrome (formerly "RSD")
- ◆ Causalgia
- ◆ Cancer Related Pain
- ◆ Spasticity and related pain (including Multiple Sclerosis and Cerebral Palsy)

Patients may also be referred specifically for the following advanced interventions:

- ◆ Epidural Steroid Injections
- ◆ Spinal Facet Joint Injections
- ◆ Trigger Point Therapies
- ◆ Selective Nerve or Joint Injections
- ◆ Discography
- ◆ Radiofrequency (RF) Nerve Ablation
- ◆ Diagnostic and Neurolytic Sympathetic Blocks
- ◆ Spinal Cord Stimulation (SCS)
- ◆ Spinal Infusion Pumps (for both Pain and Spasticity)