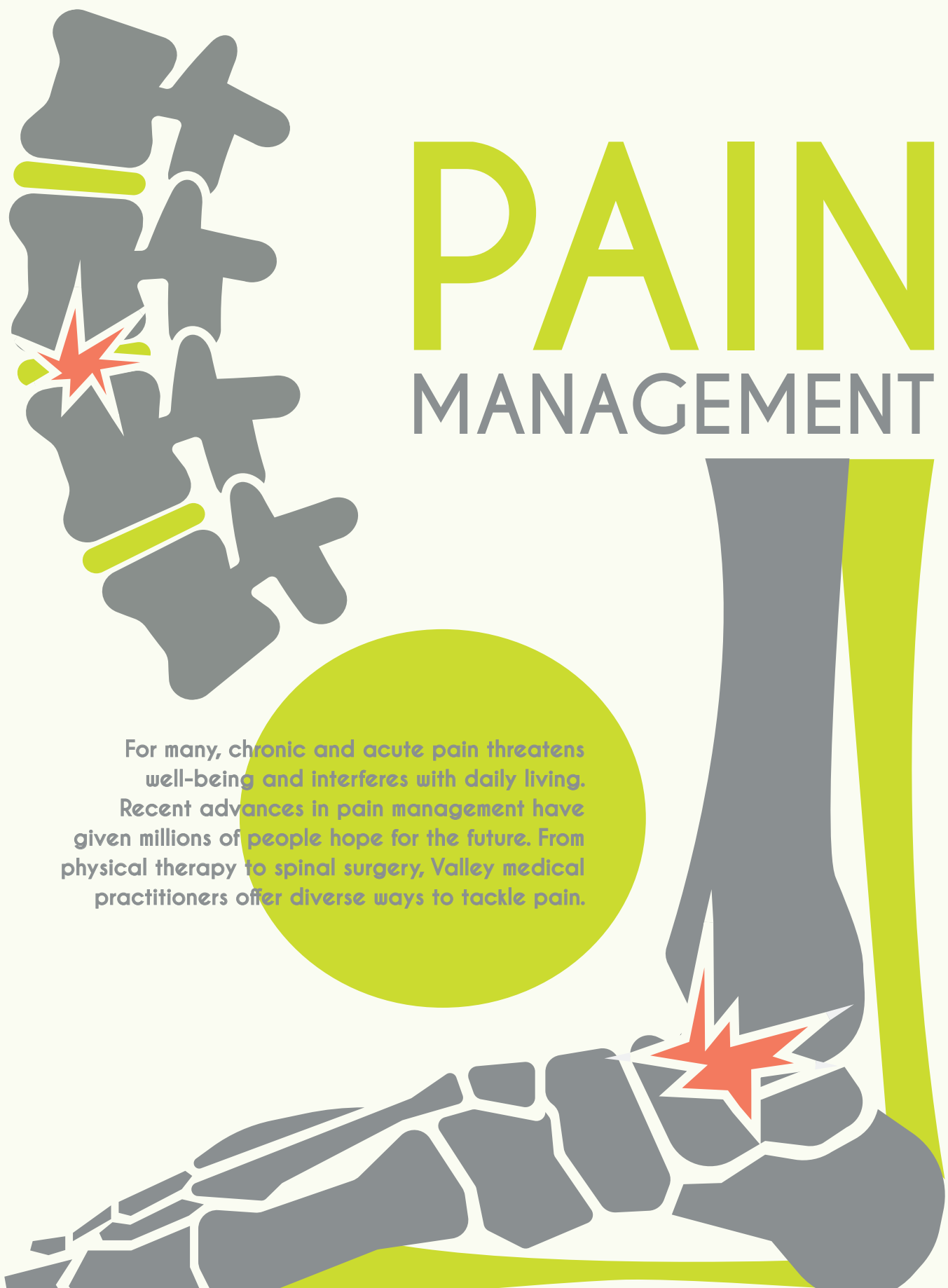


PAIN MANAGEMENT



For many, chronic and acute pain threatens well-being and interferes with daily living. Recent advances in pain management have given millions of people hope for the future. From physical therapy to spinal surgery, Valley medical practitioners offer diverse ways to tackle pain.

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Pain defies definition, yet it affects the lives of an estimated 100 million Americans, according to a recent study conducted by the Institute of Medicine of the National Academies. While hard to define and describe, pain is associated with a wide variety of injuries, diseases and chronic conditions, including headaches, lower back pain, cancer, arthritis and various neurological disorders.

Diagnosis and treatment of pain requires the expertise of many practitioners working as a team to help the patient. Because of the diversity of pain conditions, treatment approaches range from physical therapy, to medication and injections, to surgery. Armed with the advances made in pain research over the past decade, Valley health professionals are equipped with the most up-to-date information and state-of-the-art equipment to help patients fight and alleviate pain. Here is what a few Valley physicians and pain specialists have to say about their approaches to combating pain and what they see for the future of pain management.

DIAGNOSIS

When a patient seeks help for pain, the first step is to listen to what he or she has to say and take a look at any previous records, says Evan J. Freedman, D.O., a board-certified interventional pain management physician with The Core Institute, a consortium of orthopedic medical practitioners. "I try to figure out what the source of their pain is, and based on that information I can come up with a treatment plan." That plan may include physical therapy, pain medications and injections. "The majority of cases that come through my door usually are non-surgical. We want to try the conservative options prior to proceeding with surgery."

David Jackson, M.D., a board-certified orthopedic spine surgeon with The CORE Institute, echoes Freedman's sentiment. "When treating people with back or back-related pain, we start with non-surgical measures, because frequently we

can get the pain under control and even resolved without having to resort to surgery. When those measures fail, we have a lot of good surgical options to treat pain," he says.

Farhad Mosallaie, D.O., a board-certified pain management specialist with Sonoran Spine Center, treats patients with spine disorders and a variety of musculoskeletal ailments. "Many times, the patient is seen by a surgeon and then sent to me because we want to start with the most conservative treatment, which is physical therapy, medication and then, injections," he explains.

Many practices provide in-house physical therapy and imaging, but patients are frequently sent to outside practitioners. Marvin Tam, M.D., a board-certified radiologist affiliated with EVDI Medical Imaging, says his group provides all the imaging required for the evaluation of pain, from the easiest method – an X-ray – to





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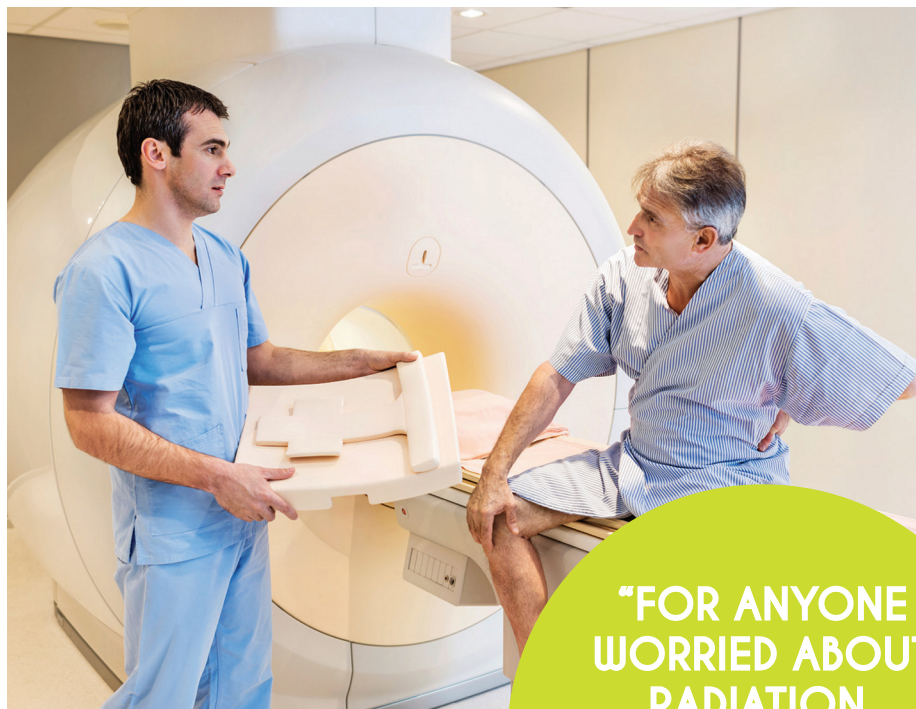
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the most sophisticated – the 3-Tesla MRI, an ultra-high-resolution magnetic resonance imaging machine that uses pulses of radio-wave energy to make detailed pictures of organs and structures inside the body. "For anyone worried about radiation, there's none associated with MRI," Tam says. The 3-T MRI also can safely scan patients who have implanted metallic devices such as certain pacemakers and spinal cord stimulators.

EVDI also performs an array of pain diagnostic tests, including CT scans, which are X-rays that produce cross-sectional images of the body; fluoroscopy, X-ray imaging that examines the tissues and deep structures of the body; arthrography to examine joint spaces; and magnetic resonance neurography to image nerve roots. "We help physicians target what the incriminating joint or body part might be that's causing the pain."

The Orthopedic Clinic Association (TOCA) offers X-ray imaging and physical therapy at locations throughout the Valley, as well as MRI imaging at its Phoenix office. TOCA physicians are equipped to diagnose and treat an array of neuromuscular and musculoskeletal conditions,

including bulging and herniated discs, arthritis, spinal stenosis and sciatica.

"Interventional spine specialists receive advanced training in the diagnosis and interpretation of advance imaging studies such as MRI, and treatment and utilization of minimally invasive fluoroscopically guided spine procedures in the management of painful spine disorders," says Christopher Huston, M.D., a fellowship-trained spinal surgeon and physical medicine and rehabilitation physician with TOCA. "This is a relatively new subspecialty. The goal is to provide more accurate diagnosis of painful spine conditions to provide better and more specific treatment."

Another of TOCA's subspecialties is sports medicine. Doctors provide wide-ranging care to amateur as well as professional athletes, prescribing treatments from physical therapy to orthopedic surgery depending on the extent of the injury. TOCA's philosophy is clear cut: "Our mis-



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TREATMENT

After completing a comprehensive history and physical, some practitioners will start with a treatment plan of physical therapy with appropriate exercises to help alleviate pain. Other therapeutic treatment modalities include aquatic therapy, acupuncture, massage or chiropractic treatment, according to Ramoun Jones, M.D., a double board-certified physician with The Pain Center of Arizona. Many times those treatments are administered in conjunction with anti-inflammatory drugs, muscle relaxants and other pain relief medications, he says.

If those treatments don't lessen the pain, physicians at The Pain Center of Arizona administer steroid and non-steroidal injections and nerve blocks for a variety of pain-causing conditions. For those with headaches not abated by medication, physicians can administer Botox injections or perform a nerve block.

The Pain Center of Arizona also performs minimally invasive procedures such

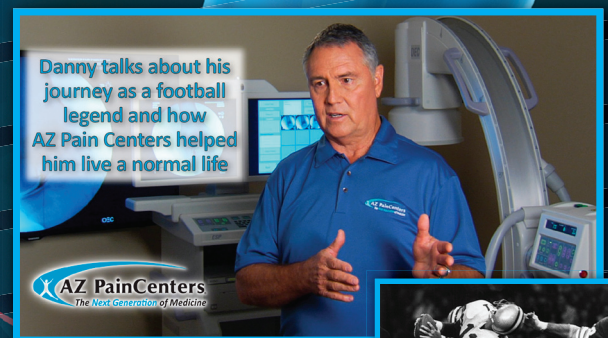
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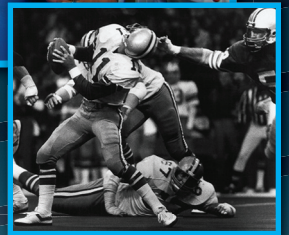
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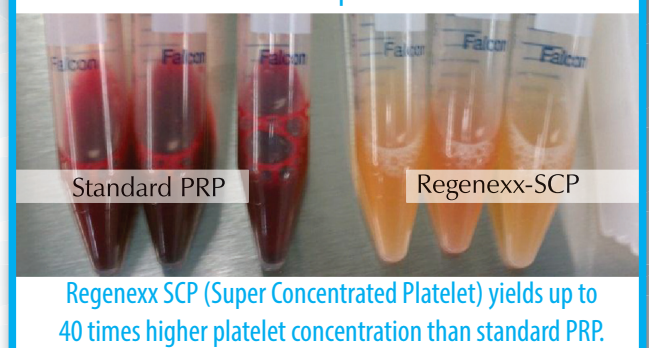


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as radiofrequency neurotomy, a procedure for cauterizing nerves to block pain signals to the brain. Most procedures are done in the office with minimal recovery time and patients go home the same day.

Minimally invasive spinal interventions often require the physician to inject a needle into the spinal region, a fearful prospect for many patients. However, The CORE Institute's Dr. Freedman says physicians use an X-ray machine to help them guide the needle to the proper spot.

"There are a variety of injections that work on different aspects of the spine. We can inject steroids onto an irritated nerve root and hopefully calm down inflammation in the area and give the patient pain relief."

Another treatment option for spine ailments is a spinal cord stimulator, a device that can be placed into the epidural space next to the spinal cord to treat chronic nerve-related pain as well as chronic back pain, according to Dr. Freedman. "It creates an electrical impulse on the spinal





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cord, which inhibits normal pain signals from transmitting to your brain, therefore giving the patient pain relief. It's a technology we use for patients who have undergone therapies, medications, injections and sometimes surgery without much benefit. For some people it works really well."

Spinal cord stimulators are implanted on a trial basis to see if the patient is a good candidate to have a permanent implant, Dr. Mosallaie says. "The patient will try it for a week to see if it gives them

relief, then one of our surgeons will put it in permanently."

SURGICAL OPTIONS

For those whose pain isn't improved with conservative treatment, surgery is an alternative. Spinal surgery has evolved to being minimally invasive compared with techniques that were employed just a few years ago, Dr. Jackson says. "Spine surgery used to mean a life sentence of pain and limitation. It would often mean a very

large incision... and patients would spend weeks in the hospital and have recoveries that could last months if not years. Now patients can go back to work in days or weeks and most importantly, when they do recover, they can return to almost all activities that they want with very little pain."

The radiation oncologists at Phoenix CyberKnife and Radiation Oncology Center perform stereotactic radiosurgery, a method that uses high doses of radiation with pinpoint accuracy that spares healthy tissue, to treat patients with can-



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Invasive surgery may not be the answer for many people who suffer from chronic pain. AZ Pain Centers offers a number of non-invasive pain management procedures to treat most pain issues. Some of the most common conditions are headaches, fibromyalgia, joint pain, and neck and back pain that may or may not be associated with herniated discs. The team at AZ Pain Centers treats a wide spectrum of individuals, from high-level athletes — including six-time Olympic gold medalist swimmer Amy Van Dyken-Rouen, legendary ASU and Dallas Cowboys quarterback Danny White and five-time AMA motocross national champion Destry Abbott — to your average person with common injuries, as well as arthritis and other degenerative problems.

Most patients are looking for a viable option to their condition without the use of drugs and/or invasive surgery, according to Dr. Reiner Kremer, medical director of AZ Pain Centers, whose four facilities offer traditional procedures, including

non-steroidal and low-dose steroidal injections to relieve pain. In addition, AZ Pain Centers is the only center in Arizona that offers regenerative procedures including Regenexx®, the most advanced non-surgical stem cell and blood platelet treatments for common injuries and degenerative joint conditions. These procedures utilize a patient's own stem cells or blood platelets to facilitate the healing of damaged tissues, tendons, ligaments, cartilage and spinal discs.

Dr. Kremer states that, “one of the most exciting new interventional orthopedic procedures is stem cell implantation, an FDA-compliant procedure that utilizes the patient's own harvested stem cells that are processed in our laboratory and then re-injected the same day into the damaged or painful area to support the body's natural repair process. Within days, patients can experience a marked decrease in pain and increased function. The goal is to improve the quality of life and restore physical function.”

Another regenerative procedure uses the patient's own blood platelets that have been prepared in a laboratory setting, and then injected into the targeted area. “Many practitioners use platelet-rich plasma (PRP), but AZ Pain Centers is the only facility in Arizona that offers proprietary super concentrated platelets (SCP)TM and platelet Lysate (PL)TM that have been demonstrated in the laboratory to have up to 40 times greater capacity to heal than common PRP,” Dr. Kremer says.

The goal at AZ Pain Centers is to have patients resume their normal activities, and to avoid unnecessary surgery and the long recovery time associated with surgery.



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cerous and non-cancerous tumors. The “surgery” doesn't require an incision, needles or anesthesia. They are also able to treat oncology patients with metastatic disease — cancer that spreads to other organs or lymph nodes from the primary tumor. A large number of those metas-

tasis are painful — as high as 50 percent, says John J. Kresl, M.D., a board-certified radiation oncologist with Phoenix CyberKnife. “We offer a treatment that can pinpoint and treat the metastasis that's causing the symptoms and ablate that metastasis or get it to shrink or disappear.

Many times you can reverse or eliminate those symptoms.” Most of the treatments can be delivered in just one session, which is not only convenient for the patient, but also cost-effective, he adds.

Dr. Kresl also treats patients afflicted with trigeminal neuralgia, a painful con-



dition that causes episodes of intense, sharp and excruciating pain in the face and upper neck. Many patients' pain can be controlled with medication, but for patients whose pain has progressed, Dr. Kresl can treat the trigeminal nerve with CyberKnife surgery. Patients usually only need one treatment, which provides long-term pain relief.



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LOOKING TO THE FUTURE

Pain management is constantly evolving and health-care providers are embracing new innovations that help them deliver the most current and effective treatments to patients.

Advances in radiology will help physicians better locate the source of a patient's pain, Dr. Tam says. Higher power MRIs are on the horizon, which will enable phy-

sicians to more closely examine smaller musculoskeletal body parts such as fingers and joints. "MRI is phenomenal. It has been a game changer in helping diagnose pain in any part of the body," he notes.

Another form of emerging technology – improved computer-aided navigation systems – will help surgeons access areas of pain less invasively, with less collateral damage and with smaller incisions, which means quicker recovery and less pain af-

terward, Dr. Jackson says.

Patients who are candidates for CyberKnife surgery can look forward to more highly trained physicians in the field, adds Dr. Kresl. "It's the most rapidly growing segment of radiation therapy because of its effectiveness, with all of the scientific and clinical medical facts to back it up. Most radiation oncologists are not trained in CyberKnife radiosurgery, but it's coming and continues to grow."

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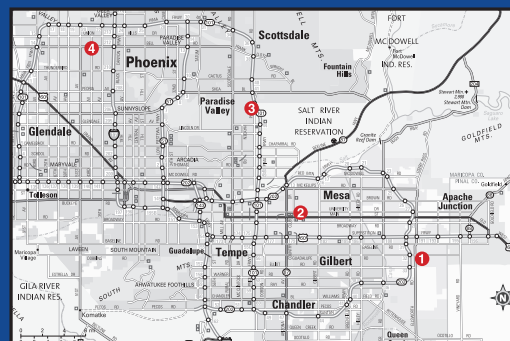
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