

Chronic pain: Watch out before accepting diagnosis and treatment

September 8 2011

A new commentary published online in *The FASEB Journal* argues that patients should be diligent and demand proof of safety and benefit before beginning any treatment regimen for chronic pain, as some treatments have very little scientific evidence that they actually alleviate the conditions for which they are prescribed. In the article, Phillip J. Baker, Ph.D., Executive Director of the American Lyme Disease Foundation, dispels myths surrounding chronic Lyme disease, using it as an example of why patients should ensure that diagnostic and treatment tools are approved by the Food and Drug Administration and not just recommended by other patients and physicians.

"Despite repeated warnings by the [Centers for Disease Control and Prevention](#) and the [Food and Drug Administration](#), the diagnosis of chronic [Lyme disease](#) often is based on the false results of non-standard test procedures, not approved by the FDA," said Baker. "This is inexcusable since 46 FDA-approved tests are available and used routinely by various state public health laboratories. A false diagnosis can result in patients being placed on prolonged antibiotic therapy or some other unproven and potentially harmful remedy."

Baker also says that before agreeing to undergo any [treatment regimen](#) for chronic pain, patients should ask their physician to provide results from published, placebo-controlled studies proving that the proposed remedy is both beneficial and safe. Testimonials by previously treated patients—regardless of the number—are not sufficient proof of benefit and safety. Unapproved and undocumented treatments are usually not

covered by health insurance and therefore result in a huge financial burden to the patient. Chronic Lyme disease must be considered as part of a broad-based, multidisciplinary effort to understand the cause and treatment of chronic pain in general as outlined by the Institute of Medicine's report, "Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education, and Research" (<http://www.iom.edu/Reports/2011/Relieving-Pain-in-America-A-Blueprint-for-Transforming-Prevention-Care-Education-Research.aspx>).

"When doctors don't know what's causing a patient to experience chronic pain, desperation can set in," said Gerald Weissmann, M.D., Editor-in-Chief of The [FASEB Journal](#). "That desperation, however, is no excuse for pushing the boundaries of the Hippocratic Oath by diagnosing a patient with a poorly defined health condition, like chronic Lyme disease, for which the only remedies are unproven and may only cause more harm."

More information: Phillip J. Baker. The pain of "chronic Lyme disease": moving the discourse in a different direction. *FASEB J.* fj.11-192898; [doi:10.1096/fj.11-192898](https://doi.org/10.1096/fj.11-192898)

Provided by Federation of American Societies for Experimental Biology

Citation: Chronic pain: Watch out before accepting diagnosis and treatment (2011, September 8) retrieved 25 April 2024 from <https://medicalxpress.com/news/2011-09-chronic-pain-diagnosis-treatment.html>

| |
|--|
| <p>This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.</p> |
|--|