Pain can be a common side effect of cancer and its treatment. It can also make other symptoms or side effects of cancer seem worse. But nearly all cancer pain can be managed, with or without the use of medication.

**What causes pain?**
People with cancer may have pain caused by the cancer itself or as a side effect of treatment. For example, a tumor may press on bones, nerves, the spinal cord, or organs, causing pain. Pain may also develop after surgery, radiation therapy, or chemotherapy. Pain usually gets better over time, but some people may experience pain for months or years as a result of permanent damage to the nerves. Some pain, such as arthritis, lower back pain, or migraines, may not be related to the cancer at all. However, it is still important to tell your health care team about this type of pain, so it can be addressed as part of your overall treatment plan.

**What are the types of pain?**
There are different types of cancer pain. Pain may last just a short time after a particular treatment or other event. Pain may only occur from time to time. Or, it may be long-lasting and constant. Pain may also suddenly get worse even though it is being treated. This is called breakthrough pain. It typically happens between scheduled doses of pain medication, but it may not be linked to a specific movement or time of day.

**What does the health care team need to know about my pain?**
Tell your health care team about any type of pain you experience. The health care team’s role in managing pain is to listen to your concerns and offer a solution. They may ask you to explain the intensity of the pain using a scale from 0 to 10 or use words, such as “burning,” “stabbing,” or “throbbing,” to help describe the pain. You should write down when and where you have pain and note whether anything makes the pain worse or better. Some people find that tracking their pain, such as by using a journal or an app, helps them describe the pain to their health care team.

**What are the treatment options for pain?**
Doctors can manage pain by treating the source of the pain; changing how a person feels pain, usually with pain-relieving medications; or interfering with pain signals sent to the brain through spinal treatments or nerve blocks. If medication is needed, non-opioid painkillers, such as acetaminophen and ibuprofen, are used for mild to moderate pain. Doctors may also prescribe other medications, such as antidepressants or anti-seizure medicines, to help relieve some pain, particularly nerve pain. Opioids, such as morphine, may be used along with other treatments when other methods have not worked. In addition, where it is legal, medical cannabis or cannabinoids could be an option, along with other methods for unrelied pain. Many people also find relief through complementary treatments, including physical and occupational therapy, acupuncture, and mindfulness practices, such as meditation or breathing exercises. Complementary treatments are therapies, techniques, and products used in addition to standard medical treatment. A pain management plan may include a combination of medication and complementary treatments. Learn more at www.cancer.net/pain.

**ASCO ANSWERS** is a collection of oncologist-approved patient education materials developed by the American Society of Clinical Oncology (ASCO) for people with cancer and their caregivers.
Questions to ask the health care team

Regular communication is important in making informed decisions about your health care. It can be helpful to bring someone along to your appointments to take notes. Consider asking your health care team the following questions:

- What do you think is causing my pain, based on my description?
- Would you explain the options for managing my pain?
- Do you recommend pain medication? If so, which medication would you recommend?
- Is there a risk for abuse of this medication?
- What are the side effects of the medication?
- How can these side effects be managed?
- How long will I get pain relief from a dose of the medication you are suggesting?
- How long will it take before I know how effective this medication will be?
- Why is it important for me to take my medication exactly as instructed?
- Where and how should I store this medication?
- What are other strategies for managing pain in place of or in addition to medication?
- Where can I find emotional support for me and my family?
- If I have a question or problem, who should I call?

Find more information about pain and questions to ask the health care team at www.cancer.net/pain and www.cancer.net/sideeffects. For a digital list of questions and a symptom tracker, download Cancer.Net’s free mobile app at www.cancer.net/app.

Words to Know

- **Acupuncture**: A complementary therapy where fine needles are inserted into specific points along the body to relieve pain or discomfort.
- **Analgesic**: A medication that relieves pain.
- **Anesthetic**: A medication that causes total or partial loss of physical sensation.
- **Biofeedback**: A method in which people use their minds to control a response from their body, such as heart rate.
- **Intravenous (IV) medication**: Medication injected into a vein.
- **Nerve block**: Injection of a medication directly into the nerve or spine for pain control.
- **Neuropathic pain**: Burning, shooting, or numbing pain from nerve damage.
- **Opioid**: A medication that requires a prescription and provides strong pain relief.
- **Oral medication**: A medication taken by mouth.
- **Pain threshold**: The point at which pain is noticeable.
- **Pain tolerance level**: The peak amount of pain that a person can handle.
- **Rescue medicine**: A medication used to control breakthrough pain.

Health Care Professionals: To order more printed copies, please call 888-273-3508 or visit www.cancer.net/estore.