

Trending: Nondrug Pain Relief

Editorial Staff

With September designated as national Drug-Free Pain Management Awareness Month by the Society for Healthcare Strategy & Market Development and on the American Hospital Association's official health care calendar, the [Foundation for Chiropractic Progress](#) has a month-long series of media events and activities planned to help promote the value of chiropractic care as a first-line, nondrug treatment approach.

How can *you* expand the opioid / pain management discussion and better inform your patients, other health care providers and your community this month and beyond? The F4CP, which sponsored the annual awareness campaign, provides a number of valuable tips / resources (<http://drugfreepaincare.org>), including a comprehensive opioid toolkit. The foundation also shared the following for *Dynamic Chiropractic* readers courtesy of Drs. Gerry Clum, president emeritus of Life Chiropractic College West; and William Meeker, president of Palmer College of Chiropractic West. Dr. Clum is a member of the F4CP executive committee, while Dr. Meeker is a foundation board member.

1. *Get Scientific*: "The pathway that opiates interrupt is also the pathway that adjustments interrupt, but without the addiction and adverse outcomes. Every DC should understand this in detail and share with their patients."

2. *Make the Comparison*: "With the percentage of American adults using opioids, we should bring attention to opiate-impaired drivers being as dangerous to themselves and others as alcohol- or marijuana-impaired drivers."

3. *Show the Ripple Effect*: "Extrapolate the problem from one single user to that person's family, the economic impact of the problem and then the civil and criminal aspects arising from the problem."

"Opiates kill people. Opiates impair people. Opiates cause people to be arrested. Opiates disrupt/destroy families. Opiates cause people to lose jobs and careers. Lost jobs, careers, and families moves people into crime. We should highlight that this problem has many layers which move out from the center (opiate use) and ripple out great distances with great impact - all harmful to the user, the user's family, the user's co-workers, the user's employer, the community, etc."

4. *Move Beyond Risk/Benefit*: "There are many ways to engage the discussion of opioids other than risk and benefit. The opioid matter has great connections to discussions of history, geography, politics and power as opportunities to come back around to the pain discussion. For example, Hong Kong exists today because the agreement to establish H.K. as a British outpost was part of the settlement of The Opium Wars of the late 1800s."

"We also hear a lot about the Middle East [these days], and it has played an important role in the evolution of opium-related activities on a religious basis. Mohammed prohibited alcohol and tobacco, but not opium, as [the people] were traders and shippers for centuries."

5. *Take a Different Approach*: "Reach out to the addiction management community, rather than the prescription provider community, and let them know you understand the problem and offer another perspective on how to prevent opioid addiction."

6. *Get Informed*: "Understand what the CDC, the FDA and IOM actually say in terms of nonpharmacologic health care."

7. *Make a Connection*: "Partner with other non-prescriber health providers, especially nurses."

8. *Start Local*: "Reach out to civic clubs with information about the scope and extent of the problem, and how chiropractic is a safe, effective alternative to pain-relieving medication."

Editor's Note: Depending on when you read this article, there may be time to contact key local stakeholders (mayor, civic organizations, etc.) and request they sponsor a formal resolution commemorating September 2017 as Drug-Free Pain Management Awareness Month. The F4CP has made it easy with a [sample letter](#) and [resolution](#).

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