

## Documented: Big Regulatory Barriers To Cancer Pain Relief Worldwide

BY HEATHER LINDSEY

**M**ore than half of the world's population lives in countries where regulations aiming to prevent opioid misuse leave cancer patients without access to pain medicines, according to new data from the Global Opioid Policy Initiative (GOPI) (*Ann Oncol*; Dec 2013;24, suppl 11).

Overall, the survey of 104 countries in Africa, Asia, the Middle East, Latin America and the Caribbean, and India “confirms what many of us thought when looking at opioid-consumption data,” said James F. Cleary, MD, FACHPM, one of the authors and Associate Professor of Medicine and Director of the Pain and Policy Studies Group (PPSG) at the University of Wisconsin Carbone Cancer Center. “Few opioid medicines are consumed for medical and scientific purposes.”

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## ASCO Report on 2013 Advances: Progress, But Harm from Budget Cuts

BY PEGGY EASTMAN

**T**he American Society of Clinical Oncology's year-end report on the major clinical cancer advances in 2013 documents much to celebrate, but sounds a

strong note of alarm due to budget cuts for cancer research funding.

To keep cancer research strong and counter funding cutbacks, ASCO is seeking a fiscal year 2014 appropria-



tion of \$32 billion for the National Institutes of Health, including \$5.2 billion for the National Cancer Institute.

While the recent Senate-House budget agreement is a step in the right direction of making up for what ASCO calls years of stagnant funding and cuts to NIH, the agreement falls short in protecting the nation's cancer care infrastructure, the

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## Sales and Marketing of Ponatinib Resume

The U.S. Food and Drug Administration has approved a revised U.S. Prescribing Information (USPI) and Risk Evaluation and Mitigation Strategy (REMS) for the leukemia drug Iclusig (ponatinib). In addition, the agency has asked Ariad Pharmaceuticals, the drug's manufacturer, to conduct post-market investigations to further characterize ponatinib's safety and dosing.

These required safety measures include:


- Label changes to narrow the indication;
- Providing additional warnings and precautions about the risk of blood clots and severe narrowing of blood vessels;
- Revising the recommendations about the dosage and administration; and
- Updating the patient Medication Guide.

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# Study Identifies Factors Associated with Pain One Year after Breast Cancer Surgery

A study of 860 patients who had undergone surgery for breast cancer, published as a “Research Letter” in the January 1 issue of the *Journal of the American Medical Association*, found that the majority reported some level of pain 12 months after surgery, and that the factors associated with pain were chronic preoperative pain, chemotherapy, preoperative depression, and pain in the area to be operated.

“Persistent pain following breast cancer treatments remains a significant clinical problem despite improved treatment strategies,” a news release from the journal notes. “Data on factors associated with persistent pain are needed to develop prevention and treatment strategies and to improve the quality of life for breast cancer patients.”

For the study, led by Tuomo J. Meretoja, MD, PhD, of the Breast Surgery Unit of Helsinki University Central Hospital, patients younger than 75 with nonmetastatic breast cancer

treated there during 2006 to 2010 were sent a questionnaire 12 months after surgery, asking for assessments of the presence and intensity of pain.

At 12 months after surgery, 34.5 percent of the patients reported no pain, about 50 percent reported mild pain, 12 percent reported moderate

pain, and about four percent reported severe pain.

The factors associated with pain at 12 months were chronic preoperative pain, preoperative pain in the area to be operated, axillary lymph node dissection, preoperative depression, chemotherapy, and radiotherapy.

“These findings may be useful in developing strategies for preventing persistent pain following breast cancer treatment,” the authors said. “To identify patients who would benefit from preventive interventions, a risk-assessment tool is needed.”

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