



I'm Sorry! You may have to Endure the Oral and Facial Pain a Little Longer

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Received: December 17, 2020

Published: December 29, 2020

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Head and neck cancers (HNC) are one of the ten leading cancers globally, and its incidence in Africa in general and Ghana in particular is increasing [1,2]. HNC are associated with profound mortality and morbidity. Pain in face, oral cavity and throat are among the most common presentations before treatment when the tumor is pressing on and invading local structures, during treatment due to severe oral mucositis and effect of radiotherapy on facial and trigeminal nerves and surrounding tissues, and after surgical treatment and chemoradiation due to persistent effect on nerves [3,4]. Patients therefore experience a combination of nociceptive and neuropathic pain chronically [5]. Oral and facial pain presented by patients with HNC before, during or after treatment is mostly severe, requiring the initiation of opioids in accordance with the WHO analgesic ladder [6]. Adjuvant analgesics such as pregabalin and gabapentin are also recommended to control painful neuropathy [7,8]. Some patients do not however achieve pain control with the most commonly available opioid, morphine, as well as with fentanyl. In those patients, methadone has been found to have better pain control and improve quality of life [9,10]. Methadone is however unavailable in Ghana for use in palliative care of patients suffering from cancer. Patients experiencing poor pain control with morphine plus an adjuvant have to endure pain because methadone is unavailable. It is therefore recommended that stakeholders and policy makers at the national and international levels reconsider restrictions on methadone availability to make it accessible to patients who needed it.

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