Sublingual Ketamine in chronic pain: Service evaluation by examining over 200 patient years of data

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Abstract

I present more than 200 patient years of observational data, including Brief Pain Index (BPI) outcomes on patients who have found sublingual Ketamine useful to help manage their pain symptoms. Data was obtained from our Pain Audit Collection System (PACS), review of the local electronic patient record (EPR) and a separate bespoke database. The observations and treatment took place at an NHS district general hospital multidisciplinary pain clinic in England from 1st January 2000 onwards. Data was locked down on March 1st 2012 to allow analysis to be undertaken. As Ketamine was often tried in combination with other pain treatment modalities, the observations made may be confounded by the effects of other pain treatments. Out of 249 patients tried with Ketamine, 95 patients found it of little use on the day that they tried it. A further 107 patients took Ketamine for as little as 1 month up to as long as 7 years before stopping it. At the time of data analysis, 47 patients were still taking sublingual Ketamine. 32 of these 47 patients had been taking sublingual Ketamine for more than 2 years. The PACS Treatment Assessment Form consists of the BPI questionnaire and also asks one additional question: "In the last week how much relief have pain treatment or medications, obtained from this clinic, provided? Please circle the one percentage that most shows how much relief you have received." In the 32 patients, who had been taking Ketamine for more than 2 years, Ketamine did not consistently improve BPI scores, but these patients did report pain relief when taking Ketamine. The mean of all 32 modal pain relief scores was approximately 56% pain relief. At the doses used in my practice, no patient in this series has developed ulcerative cystitis. I conclude that used carefully, low dose Ketamine has a useful role to play in the management of chronic pain.

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