

Opioid

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icine govern the use of opioids and require a doctor-patient contract, random urine tests, pill counts and other measures designed to minimize the potential for abuse. These rules protect both patients and prescribers, he said, and should be strictly observed and enforced.

Naturopathic doctor Sarah Kotzur, who practices in Portland, also manages patients with chronic pain. Many of her older patients suffer from wear-and-tear osteoarthritis and autoimmune disorders such as rheumatoid arthritis and fibromyalgia.

“Their pain can be really debilitating,” she said.

Naturopaths, like MDs, attend at least four years of medical school after earning a bachelor’s degree and are well-versed in current medical science, Kotzur said.

“The main difference is that naturopaths believe in the healing power of the body to right itself,” she said.

She uses dietary changes, herbal supplements and homeopathic remedies to reduce the inflammation associated with joint pain and injury, along with physical manipulation and counseling.

Adjunct therapies such as massage and reiki also may be helpful, she said, but can make it hard to tell when naturopathic treatments are really helping.

Kotzur acknowledged that the approach she uses takes time to work. But, she said, “we see some pretty incredible results.” Her patients are generally characterized by a willingness to experiment and a mistrust of mainstream medicine. Even so, sometimes they become impatient with slow progress and the continued presence of pain in their lives.

“I remind them, ‘It took you a while to get to this point; you can’t expect overnight relief,’” she said.

With a focus on improving function after stroke, spinal injury, amputation and other

traumas, the medical specialty of physiatry also provides a model for managing pain without resorting to opioids.

From physical therapy to rhizotomy to injections of a synthetic medication based on sea-snail venom, Augusta physiatrist James Wilson said, his practice aims to help people “maximize their lives and their ability to seek self-fulfillment.” Opioids are typically used only when other options fail.

Physiatry interventions also include physical manipulation, soft-tissue treatment and relaxation techniques. Non-opioid painkillers include over-the-counter medicines such as Tylenol and ibuprofen. Anticonvulsant drugs may quiet over-irritated nerve endings, and some antidepressants are effective against arthritis and fibromyalgia.

When alternative therapies don’t work

But for some, opiates remain the solution that works.

One of Wilson’s patients is a woman in her 50s named Jo, who asked to be identified only by her middle name. She’s suffered from lower back pain most of her adult life. When she was in her mid-40s, it started to worsen, with burning pain shooting through her hip joints and down both legs most of the time. She was determined to tough it out. Women in her family had a history of back troubles.

“I thought it was just part of getting older,” said Jo.

But eventually, a diagnostic exam revealed the problem: advanced osteoarthritis, osteoporosis and progressive deterioration of the discs in her spinal column.

“My doctor was flabbergasted at the amount of damage,” Jo said.

She launched upon a long course of medical consultations, surgeries and procedures to relieve her pain and reclaim her active life. Over the course of four years or so, she underwent nerve blocks, epidural injections, steroid

treatments and fusions of the crumbling bones in her neck and back. Her spinal damage worsened. Her pain rapidly became more severe.

“I had no idea pain like this even existed,” she said.

Always an active participant in her workplace, her community and her family, she started spending more and more time in her recliner.

More than once, her primary care doctor offered to write a prescription for a strong opioid painkiller. She refused.

“I was not going to take opiates,” Jo said. “I did not want to be the kind of person who relies on medication to get up and live my life.”

She knew enough about opioid drugs to be afraid of them — the potential for abuse and addiction, the possibility of having them stolen, the unpleasant side effects. She wanted nothing to do with all that, for herself or her family.

But finally, reluctantly, after connecting with Wilson and working through all her other options, she agreed to try an opioid patch for the debilitating pain that threatened to immobilize her forever. The painkiller crosses from the patch through her skin and into her bloodstream at a steady rate. A secondary oral medicine eases her over any rough spots. She is experiencing few side effects. She calls the patch a lifesaver.

The key, she said, was finding a doctor who understood her priorities and was willing to work with her systematically to rule out other options. When it became clear those other options would not work for her, it was easier to accept the opioid painkiller they both had hoped to avoid.

“I fought this for so long,” she said. “I really cannot tell you what a difference it has made. Before, I couldn’t do anything. Just walking was excruciating. Now I’m going to the office, playing with my grandkids, cooking supper, doing laundry.”

She gave a small laugh. “Who would think it could be such a pleasure just to do the laundry?”

Haskell

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able-stay Penobscot Narrows Bridge, and staying at the historic Jed Prouty Inn on Main Street, now converted into senior housing. I admitted that I thought the paper mill was an unfortunate blight on the landscape until I matured enough to understand that it was the very foundation of the town’s prosperity and culture.

They listened patiently as I recounted my divorce, my subsequent foray into online dating and my first eyeball-to-eyeball meeting with Douglas, which took place, prosaically enough, in the parking lot of the Bucksport Hannaford store and wrapped up with dinner at MacLeod’s Restaurant. Now, I said, nearly 45 years after realizing that Maine was home, I live just across the river in

Noonan

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slows digestion. Also, some patients with chronic right shoulder or upper back pain will only find relief when gallbladder function is restored to normal. A natural food that is used to improve gallbladder function is beets; in our office we use a supplement composed primarily of beet concentrate with good success. There also are herbs that are helpful in dealing with gallbladder inflammation.

The conclusion? To prevent gallstones, the usual wellness principles apply. It is wise to avoid highly processed foods, especially fats; this is especially true of the “trans” fats, as well as fried foods, including chips. Also, it is helpful to minimize medication use, maintain a healthy weight and stay active. Avoid “crash dieting” and low fat diets. Of course, this is the same advice that is given for heart disease, diabetes and every other chronic disease. And when stones are already present, there are natural, drug-free treatments available that are a great first line treatment before the more aggressive therapies are tried.

Dr. Michael Noonan practices chiropractic, chiropractic acupuncture and other wellness therapies in Old Town. He can be reached at noonanchiropractic@gmail.com.

Sandy Point and turn gratefully to Bucksport for shopping, entertainment and the services of my fabulous massage therapist.

Eventually, I got around to talking about active aging, including the benefits of a holistic approach that attends to our physical, mental, emotional, social and spiritual needs. As we grow older and our abilities and goals change, I said, we should aim for balance in these essential elements of our humanity, for it is in that balance that we find wholeness, health and true well-being.

What I didn’t say and should

have was this: as a woman in my 60s, I understand from a personal perspective the need for communities to come together and plan for a future that includes, upholds and honors our senior citizens. And it is incumbent upon each of us, to the extent we are able, to be part of that process, to make our voices heard, to contribute our intelligence, creativity, compassion and idealism to preparing for our own aging in Maine. The lively, engaged group at the Bucksport Senior Center knows just what I mean, even if I didn’t have a Powerpoint slide to illustrate it.

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