

# Relieving Unnecessary, Treatable Pain for the Sake of Human Dignity

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Since 1995, the American Society of Law, Medicine & Ethics, with the generous and steadfast support of the Mayday Fund, has generated the research that is essential for changing public policy regarding effective pain relief. For all of us who have been involved since the beginning of these Mayday Projects at ASLME, this has been a labor of love and passion.

All creative work requires inspiration, and the inspiration for this body of work is the stories the patients tell of the burden of unrelieved pain. Who can listen to this parent and not feel moved:

[W]e had a good family, but how much can you watch? How much suffering can you watch from your child, your 7-year-old child, and still keep your mind?<sup>1</sup>

And so we have worked to improve the treatment of pain for all patients with a special focus on changing public policy, removing regulatory barriers, and relieving fear on the part of health-care professionals.

Although the focus of the projects has been on the legal and regulatory issues in pain management, those issues are invariably wrapped in medical, cultural, practical, and ethical concerns. Thus, this work has required all of the disciplines that converge in the American Society of Law, Medicine & Ethics. In particular, our passion for improving the care of patients in pain emerges from a basic ethical principle: Human dignity requires and demands that unnecessary, treatable pain be relieved. Severe or chronic pain blocks or seriously impedes the realization of almost all other human values. Relief from unrelenting pain is required to al-

low the human being to reflect, to enjoy human relationships, and even to think and function on a most basic level. The necessary concomitant of this starting point is that physicians, nurses, and other caregivers have a duty to provide effective pain relief where available. Although there may be serious ethical and medical concerns about particular interventions in particular situations, the ethical obligation to relieve pain is quite well accepted.

The scholars involved in the Mayday Projects since 1995 have relentlessly pursued one question: If the importance of pain relief and the ethical obligation to relieve pain are so widely recognized, why do we continue to neglect treatable pain? That single question has led us to investigate medical licensure and discipline (in the 1996 and 1998 special issues of the *Journal of Law, Medicine & Ethics*); interprofessional matters (in this issue); payment policies and practices (in 1996 and 1998); cultural, racial, and sex and gender differences in treatment (in 1996 and again in this issue); criminal prosecutions for the treatment of pain at the end of life (in 1998); and civil liability (in this issue). This third special issue on pain relief once again presents groundbreaking research, and we believe it will have the strong effect that the first two issues produced. The *Journal of Law, Medicine & Ethics* has been the major communication tool for these projects, and it has served that role well.

With the help of the Mayday Fund, we will continue to pursue this single question in all of its facets because this work is making a difference. The Pain Relief Act, proposed in the 1996 issue of the *Journal*, has become law in at least one state and formed a motivating force and a basis for change in rules in others. The research conducted and published as part of the Mayday Projects has formed a significant influence in the development of new guidelines recommended by the Federation of State Medical Boards for state disciplinary agencies. The Mayday Projects have produced not only a

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body of important research; they have also developed a leadership group of lawyer-scholars who have devoted their considerable talent and expertise to this valuable effort. The Mayday Scholars who have been funded as part of these projects have provided consultative services to many professional associations, governmental organizations, patient advocacy groups, media, and public policy efforts.

These projects have been one of the most rewarding experiences that a scholar can have. To work on an important question with a group of talented and committed people within an organization that is committed to interdisciplinary and interprofessional collaboration and with the generous support of a foundation that believes in the importance of the effort is anyone's dream. I and ASLME thank the Mayday Fund for making all of this possible and their executive director, Fenella Rouse, for her guidance and encouragement. We also thank the Mayday Scholars for their efforts, which have always exceeded the letter of their original commit-

ment, and especially Diane Hoffmann, who has taken the Society's work in this area to another level. I personally am grateful to ASLME's executive director, Ben Moulton, who has provided the structure that has allowed me to continue with the Mayday Projects. Finally, Saint Louis University's Center for Health Law Studies has been a central locus for this work from the beginning. The Center's students assisted with the research; the Center's faculty provided peer review of the papers; and the staff has provided a hospitable home for the Mayday Scholars' Workshop each year.

We look forward to the next Mayday Project at the American Society of Law, Medicine & Ethics.

#### REFERENCES

1. As quoted in B.R. Ferrell, "The Impact of Pain on Quality of Life: A Decade of Research," *Nursing Clinics of North America*, 30 (1995): at 620.

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