Pain is a common symptom experienced by patients with cancer, from diagnosis through survivorship. Whether as a result of disease or disease-related treatment, pain causes significant physical and psychosocial burdens. A uniquely personal experience, pain markedly impacts the quality of an individual's life, increases vulnerability in an already vulnerable population, and engenders dependence on healthcare providers for access to adequate pain management. Cancer pain frequently is assessed and treated inadequately (American Pain Society, 2005; National Comprehensive Cancer Network [NCCN], 2014).

Safe and effective pain management may include pharmacologic and nonpharmacologic measures. Because oncology nurses embrace holistic care and have sustained contact with patients throughout the continuum of cancer care, they are in a position to identify undertreated and untreated cancer pain and advocate for its relief. As members of interdisciplinary teams involved in practice, education, administration, and research, oncology nurses are in a pivotal position to improve cancer pain management.

NCCN (2014) reported that cancer pain can be well controlled in the vast majority of patients if evidence-based guidelines are applied, monitored, and individualized and patients engage in informed decision making for managing their pain.

It is the position of ONS that

- Cancer pain prevention and treatment are essential elements of quality cancer care throughout all phases of the cancer care continuum.
- All people with cancer have a right to optimal pain relief that includes culturally relevant and sensitive pain education, assessment, and management.
- All people with pain must be recognized, with special emphasis placed on the populations known to be at high risk for suboptimal pain management (i.e., children; older adults; minority populations; women; people with a history of previous or active substance abuse; those with limited financial resources, social support systems, or access to health care; individuals with cognitive or psychosocial impairment; and those with previous histories of analgesic allergies or metabolic alterations).
- The public, people with cancer, and significant others must be educated about the right to safe and effective cancer pain management.
- Placebos should not be used to assess or manage cancer pain, determine whether the pain is “real,” or diagnose psychological symptoms associated with pain, such as anxiety.
- Comprehensive cancer pain management is a multidisciplinary and collaborative effort that must include ongoing individual assessment, planning, intervention, and evaluation of pain and pain relief. Comprehensive pain management addresses physical, psychological, spiritual, and sociocultural effects of unrelieved pain.
- Healthcare professionals, particularly nurses, pharmacists, and physicians, are accountable to manage cancer pain effectively.
- Healthcare providers must adopt and prioritize pain as the “fifth vital sign” and standardize pain assessment throughout their workplaces.
- Professional and postgraduate cancer care curricula for nurses and other healthcare providers must include didactic information and clinical experiences related to cancer pain and its management.
- All professionals caring for patients with cancer have an ethical responsibility to acquire and use current knowledge and skills to assess cancer pain and implement evidence-based pain management guidelines
- Ongoing continuing education regarding cancer pain and its management is essential for all oncology nurses.

- The conduct of cancer pain research and the use of evidence-based findings in education and practice are priorities for nurses and the Oncology Nursing Society.

- Oncology nurses must actively involve all patients, as well as their family caregivers and significant others, in the development of a pain management plan of care and encourage open communication for the reporting of pain at all times.

- Oncology nurses must adopt pain management as a priority in continuous quality improvement initiatives.

- Oncology nurses have a professional obligation to ensure that institutional and clinical standards for cancer pain management are adopted.

- Healthcare systems and clinicians providing care to patients with cancer are responsible for adopting and monitoring institutional and clinical guidelines for cancer pain management and symptoms related to its treatment. Healthcare systems must establish mechanisms for continuous evaluation of pain outcomes in patients at risk for cancer pain.

- Healthcare facilities must establish minimum standards for clinicians' pain assessment and technical skills (e.g., epidural and patient-controlled analgesia pump management). Organizations and healthcare facilities must adopt and support the use of evidence-based pharmacologic and nonpharmacologic interventions and establish minimum standards for competency in their use.

- Regulatory, legislative, economic, and other barriers to effective cancer pain management must be eliminated.


Statement Type
Nursing Practice

References