

**European Journal of Pain, 2006 (in press)****Title:** Oncologists' perceptions of cancer pain management in Spain: the real and the ideal**Authors:** Joan Carulla Torrent<sup>1</sup>, Carlos Jara Sánchez<sup>2</sup>, Jaime Sanz Ortiz<sup>3</sup>, Norberto Batista López<sup>4</sup>, Carlos Camps Herrero<sup>5</sup>, Javier Cassinello Espinosa<sup>6</sup>, José Lizón Giner<sup>7</sup>, Joaquín Montalar Salcedo<sup>8</sup>, Kathryn Fitch Warner<sup>9</sup>, Milena Gobbo Montoya<sup>9</sup>, Eduardo Díaz-Rubio García<sup>10</sup> (on behalf of the ALGOS Group).**Affiliations:** Medical Oncology Services of the following hospitals: <sup>1</sup>Vall d'Hebrón, Barcelona; <sup>2</sup>Fundación Alcorcón, Madrid; <sup>3</sup>Universitario Marqués de Valdecilla, Santander; <sup>4</sup>Universitario, Canarias; <sup>5</sup>General Universitario, Valencia; <sup>6</sup>General Universitario, Guadalajara; <sup>7</sup>Universitario San Joan, Alicante; <sup>8</sup>La Fe, Valencia; <sup>9</sup>Técnicas Avanzadas de Investigación en Servicios de Salud (TAISS), Madrid; <sup>10</sup>Clínico Universitario San Carlos, Madrid**Corresponding author:** Kathryn Fitch Warner  
TAISS  
Calle Cambrils, 41 – 2  
28034 Madrid, SPAIN  
Tlf: 34 91 731 0383  
email: [kfitch@taiss.com](mailto:kfitch@taiss.com)**Category:** Original article**Key words:** Pain control, Pain assessment, Physician preferences, Delphi**Abstract****Aim:** Studies in some countries suggest that cancer pain is often not adequately controlled, but little is known about the situation in Spain. The objective of this study was to identify medical oncologists' perceptions about pain management in their patients.**Methods:** Two-round Delphi survey of 24 medical oncologists from 22 large, geographically diverse hospitals in Spain. Physicians rated each of 150 statements on a Likert scale (1=strongly disagree; 5=strongly agree). The mean, standard deviation and frequency of replies in three agreement categories were calculated for each item. Statements allowing comparison of oncologists' perceptions of how pain is managed in routine clinical practice with how it should be managed were grouped together and analyzed.**Results:** The most notable discrepancies between the real and the ideal occurred in the failure to provide written information or to confirm that patients understand what they are told; the lack of comprehensive and systematic evaluation of pain, and the lack of use of non-pharmacological treatments (NPTs) for cancer pain.**Conclusions:** Medical oncologists need to improve their communication skills, providing patients with both written and verbal information about their disease and the plan for pain management. Pain should be evaluated at each patient visit using validated scales, and greater attention should be paid to the possible use of NPTs.