

Black men with chronic pain at higher risk for depression, disability

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University of Michigan Health System pain specialist and anesthesiologist Carmen R. Green, M.D., continues her body of work on racial disparities in the pain experience with a new study that gives the most detailed picture yet of the impact of chronic pain on the health of black men. Black men with chronic pain were more likely to experience the downward spiral of depression, affective distress and disability than white men with chronic pain, according to her latest research. Credit: University of Michigan Health System

Black men with chronic pain related to an accident, injury, illness, surgery or other causes were more likely to experience depression, affective distress and disability than white men with chronic pain, according to a new study by the University of Michigan Health System.

The [persistent pain black men](#) experienced was more severe which might lead to greater disability, but the study by U-M researchers give clues to other factors that drive the downward spiral to depression and disability.

The findings are reported in the April issue of the *Journal of the National Medical Association* and part of a body of work developed by U-M [pain medicine](#) physician and anesthesiologist Carmen R. Green, M.D., on [racial disparities](#) in the pain experience.

Through previous research Green has shown that black women are more severely impacted by [chronic pain](#), and in general minorities have a harder time filling prescriptions for painkillers in their local pharmacies.

The latest study shows black men with chronic pain are in poorer overall health than white men and are at higher risk for not being able to take care of themselves or their families.

The study suggests the reasons for the worse outcomes among black men vary from their lower marriage rates to engagement in litigation related to their pain.

Green, a professor of anesthesiology and obstetrics and gynecology, and associate professor of health management and policy at the U-M, worked with Tamara Hart-Johnson, M.S., senior research associate, to create one of the most detailed picture yet of chronic pain's effect on the health of black men.

"Gender related differences and disparities are known. However, most studies designed to examine racial and [ethnic disparities](#) ignore gender, while those exploring gender focus primarily on a single gender, most often women," Green says.

More than 1,600 men were part of the research study and 6 percent were

black men. Physical and personal characteristics about the men were collected with the Pain Assessment Inventory Narrative, the McGill Pain Questionnaire and other clinical surveys to assess pain.

Researchers analyzed a model based on health and lifestyle factors such as education, income, marital status, litigation, substance use and high blood pressure to determine which would lead to better or worse outcomes for men with chronic pain.

Behavioral factors gave a mixed picture. Seemingly unhealthy behaviors such as alcohol and caffeine use, which black men reported less often, were associated with better outcomes. But alcohol and caffeine are often social substances, authors say, and using either may indicate that men felt better and may still be involved in social activities.

Black race emerged as a predictor of lower neighborhood income, less education and lower marriage rates.

Litigation and high blood pressure were linked with worse health outcomes, and men who were married had fewer depressive symptoms and post traumatic stress disorder. But black men were less likely to be married, had higher percentages of high blood pressure and were more likely to have ongoing legal proceedings related to their pain status compared to white men.

Some factors are modifiable such as controlling high blood pressure, but authors say the study showing distinct racial differences points to the need for using a multidisciplinary and culturally appropriate approach to caring for black men with chronic pain.

"We revealed that black men are at increased risk for the worst consequences of chronic pain and larger studies are needed to examine the pain experience in this extremely understudied population," Green

says.

More information: Journal of the National Medical Association, Vol. 102, No. 4, April 2010

Provided by University of Michigan Health System

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