

Black patients, women miss out on strongest medications for chronic pain

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Black patients are prescribed fewer pain medications than whites and few women receive medications strong enough to manage their chronic pain, according to a study in the August issue of *Journal of Pain*.

University of Michigan Health System researchers studied nearly 200 patients with <u>chronic pain</u> who sought help from a specialty pain center. Researchers analyzed the number and potency of medicines they were already taking and the adequacy of pain management.

Younger men received better pain management, and the U-M found other racial and gender gaps in the pain care journey that suggests changes are needed beginning in primary care.

"Most patients first seek help for pain from their primary care doctor," said U-M pain medicine specialist and anesthesiologist Carmen R. Green, M.D., lead author of the study. "If we are to reduce or eliminate disparities in pain care, we have to support successful primary care interventions."

Before referral to the specialty pain center, <u>black patients</u> were on 1.8 medications compared to 2.6 medicines among white patients. The <u>gender gap</u> was worse: only 21 percent of <u>women</u> were prescribed a strong opoid, compared to 30 percent of men taking a strong painkiller.

Problems with access to pain care and previous research suggests that overall, the pain complaints of women and minorities get less attention



and lesser quality treatment from health care professionals.

It's a variance that can lead to differences in outcomes such as disability, sleep disturbance and depression.

U-M researchers did not ask physicians about their prescribing practices, but they did examine barriers to treatment from a patient's point of view.

"Men and women differed on a single item -- the notion, primarily among women, to save medication in case pain gets worse. Blacks also more

more strongly endorsed that it was easier to put up with pain than the side effects of medication," Green says.

Chronic pain is increasingly common and there are many options to treat it successfully, yet people continue to suffer with inadequate pain management, authors say.

The proper assessment and treatment of chronic pain presents significant public health challenges because pain can hinder ability to work or care for families.

Green, a professor of anesthesiology, obstetrics and gynecology, health management and policy and faculty associate with the Program for Research on Black Americans at the U-M, worked with Tamera Hart-Johnson, M.S., senior research associate, on her latest study to examine health disparities in pain management.

Through previous research Green has shown blacks, women, the elderly and patients from lower socio-economic backgrounds are more severely impacted by pain and minorities have a harder time filling prescriptions for painkillers at their local pharmacies.



Provided by University of Michigan Health System

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