

Report: More than 100 million suffer lasting pain

June 29 2011, By LAURAN NEERGAARD , AP Medical Writer

(AP) -- At least 116 million U.S. adults experience long-lasting pain - the kind that lingers for weeks to months - and too often feel stigma rather than relief from a health care system poorly prepared to treat them, the Institute of Medicine said Wednesday.

All kinds of ailments can trigger lingering [pain](#), from arthritis to cancer, spine problems to digestive disorders, even as-yet-undiagnosed conditions. Whatever the cause, chronic pain costs the nation more than heart disease in medical bills, sick days and lost productivity, the report found. The tab: Anywhere from \$560 billion to \$635 billion a year.

Effective [pain management](#) is "a moral imperative," the report concludes, urging the government, medical groups and insurers to take a series of steps to transform the field.

"We're viewing this as a critical issue for the United States," said Dr. Phillip Pizzo of Stanford University, who chaired the months-long probe.

For too long, doctors and society alike have viewed pain "with some prejudice, a lot of judgment and unfortunately not a lot of informed fact," he said.

Regulatory and law enforcement steps to fight the serious problem of abuse of narcotic painkillers can be one barrier. But the institute countered that it's far more likely for a pain patient to get inadequate

care than for a drug-seeker to walk out with an inappropriate prescription. Those narcotic painkillers are a safe and effective option for the right patient, the report said.

But barriers to good care extend far beyond that one issue, said the prestigious panel, which analyzed research and the reports of more than 2,000 patients and caregivers about pain's toll.

Because pain can't be seen like bleeding, or felt like a lump, or X-rayed like a broken bone, or heard like a skipped heartbeat, [health workers](#) who wrongly believe the intensity of pain should correlate to a specific medical finding may diminish or even dismiss a patient's complaint, the report found.

In fact, pain is highly subjective. Two people with the same injury may feel different degrees of pain depending on genetic factors that affect pain tolerance, what other illnesses they have, stress or depression, and even whether they feel support or criticism from health workers or their families.

Even when pain is properly recognized, care must be tailored to each patient and often requires more than one type of therapy. Yet too few doctors are trained in its management, the report said, citing a study that found stand-alone pain courses aren't required in most medical schools. Also, insurance frequently doesn't cover the time-consuming but crucial counseling of patients in pain-management techniques, consultations with specialists or even certain treatments, such as physical therapy.

And appropriate care isn't just an issue for people with cancer or arthritis or some other severe, chronic disease. Properly treating acute pain, like that from surgery or a broken bone, is important as well. Immediate suffering aside, serious pain that isn't properly treated sometimes can hijack the nervous system and essentially rewire it for

pain - leaving misery even after the condition that caused the initial pain is resolved. That form of hard-to-treat chronic pain, the report stressed, can be a disease all its own.

Congress mandated the report as part of the new health care law. Among the report's recommendations:

- Health providers should provide and document formal pain assessments of patients, a step toward picking the right treatment.

- Medicare, Medicaid, workers' compensation programs and private health plans should cover tailored patient pain care.

- Pain specialty groups should create collaborations with primary care doctors to improve patient care and counseling.

- The government and health organizations should better educate patients and the public about pain, to help eliminate stigma.

- The National Institutes of Health should increase pain research, including designating one of its centers as the lead institute for pain.

- Training programs for doctors, nurses, dentists and other health professionals should include pain education.

- By the end of next year, the Health and Human Services Department should create a strategy for dealing with pain as a public health problem and reducing barriers to care.

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