

Group recommends large-scale collaborative research into pain management

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The feasibility of conducting larger-scale research studies on nondrug approaches for pain management in cooperation with the U.S. Department of Defense (DoD) and the U.S. Department of Veterans Affairs (VA) should be assessed by the National Center for Complementary and Integrative Health (NCCIH) at the National Institutes of Health (NIH). This recommendation was delivered in a report by a working group of the Center's Advisory Council.

"Chronic pain is a major public [health](#) problem that affects more than 100 million Americans, and research shows that it may disproportionately affect military personnel and veterans," said Lloyd Michener, M.D., professor and chair, Department of Community and Family Medicine, Duke University, Durham, North Carolina; chair of the working group. "The high rates of chronic pain in the military and veteran populations are alarming. New strategies for managing this widespread condition are urgently needed."

The working group recommended that the proposed research should:

- Assess the impact of pain on patient function and quality of life as primary outcome measures, with changes in the use of opioids and other drugs as a secondary outcome;
- Evaluate an integrated package of nondrug treatments, an integrative model of care, or a holistic approach to care rather than focusing on individual complementary health approaches;
- Focus on patients in the early stages of chronic pain;

- Leverage natural experiments and existing resources whenever possible; and
- Be pragmatic and embedded in the delivery of care.

"Pain, particularly chronic pain, is a condition that can defy our best efforts to control it," said NCCIH Director Josephine P. Briggs, M.D. "The working group's report provides valuable guidance on how NCCIH can collaborate effectively with the DoD and VA to enhance the tools available for [pain management](#). Although the proposed research would focus on [military personnel](#) and veterans, the findings could benefit all Americans who are at risk for chronic pain."

"Pain is a major focus of research at the DoD, the VA, and NCCIH," explained Eric Schoomaker, M.D., Ph.D., professor of military and emergency medicine at the Uniformed Services University of the Health Sciences (USUHS), Bethesda, Maryland; and former U.S. Army Surgeon General. "Our working group believes that by bringing the DoD and VA infrastructure together with NCCIH's research expertise, we can create unique opportunities to learn more about how to integrate complementary health approaches into pain management."

The working group prepared its report after a series of five meetings at which the group heard presentations by experts on pain research, study design, complementary and integrative approaches, and DoD and VA initiatives, practices, and priorities. A representative of a veterans' advocacy organization and a veteran who has struggled with [chronic pain](#) also addressed the group. In addition to Drs. Michener and Schoomaker, the group included Stephen Ezeji-Okoye, M.D., deputy chief of staff, VA, Palo Alto, California; Tracy Gaudet, M.D., director, Office of Patient Centered Care, Veterans Health Administration; and Richard Niemtow, M.D., Ph.D., M.P.H., consultant to the U.S. Air Force Surgeon General and assistant professor at USUHS.

More information: To view the working group report, visit nccih.nih.gov/about/naccih/military-report.

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