Chronic pain costs U.S. $635 billion a year

An Institute of Medicine report examines the personal and financial tolls and calls for an expansive federal government response.

By KEVIN B. O’REILLY, amednews staff. Posted July 8, 2011.

More than 116 million Americans struggle with chronic pain each year, and associated medical charges and lost productivity cost the nation as much as $635 billion annually.

These are the findings of "Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education and Research," a July report by an Institute of Medicine panel that calls for an aggressive national strategy to combat the problem (www.iom.edu/relievingpain).

"That's a conservative estimate of the overall economic impact because it excludes children, members of the military and individuals in nursing homes or chronic care facilities," said Philip A. Pizzo, MD, chair of the IOM panel. "We are looking at a broad demography of pain."

The report, mandated under the Patient Protection and Affordable Care Act, includes 16 recommendations for action.

The panel said that by the end of 2012, the Dept. of Health and Human Services, the Centers for Medicare & Medicaid Services and other federal agencies should:

- Create a population-level strategy for pain prevention, treatment, management and research.
- Develop strategies for reducing health plan, regulatory and other barriers to pain care.
- Support collaboration between pain specialists and primary care physicians, including referral to pain centers when appropriate.
- Designate a lead institute of the National Institutes of Health responsible for advancing pain research.

Longer-term goals include paying for coordinated pain care, improving pain education for physicians and other health professionals, increasing the number of pain specialists, and making it easier to develop and evaluate pain treatments.

Pain as public health problem

"This is a population-based problem that needs to be addressed broadly by the nation," said Dr. Pizzo, dean of the Stanford University School of Medicine in Stanford, Calif.

The panel's estimate of the economic impact of chronic pain is "mind-blowing," said Perry G. Fine, MD, president of the American Academy of Pain Medicine.

"It's a number that cannot be ignored in terms of its scope and magnitude, and it really demands a large-scale, public health response," said Dr. Fine, professor of anesthesiology at the University of Utah School of Medicine in Salt Lake City.

Dr. Fine said chronic pain should be tackled on every front with efforts similar to those mounted against health dangers such as smoking and drunken driving.

Myra Christopher, a member of the IOM panel, already is forming a community-based initiative to address the chronic pain problem. Christopher, president of the Kansas City, Mo.-based Center for Practical Bioethics, has convened meetings with the American Academy of Pain Medicine, the American Cancer Society and other health professional and advocacy organizations. Her group plans to unveil its action plan in August.

"Nobody who has worked on this wants this [IOM] report to sit on the shelf and gather dust," Christopher said.

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