

Overcoming Disparities in Pain Management: Beyond the Decade of Pain

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This educational activity is provided by the American Society for Pain Management Nursing.

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Learning Objectives

- Identify patient, provider, health care system, and regulatory barriers to effective pain management for all Americans
- Formulate care pathways to identify individual patient pain goals, improve symptom assessment, and document plans of pain care
- Employ evidence-based practice and policy resources to address healthcare disparities in pain management
- Discuss implementation strategies for overcoming barriers in the care of diverse populations

Pain Matters...

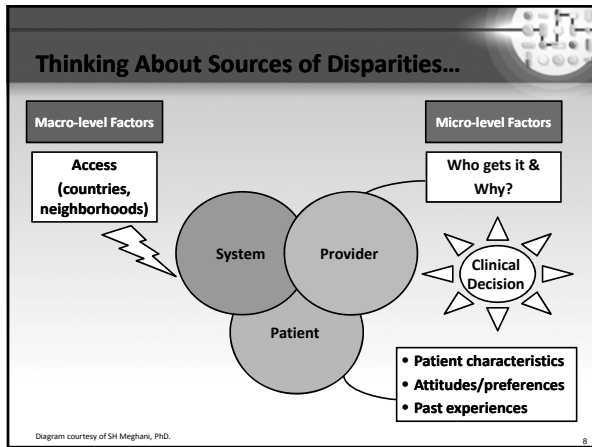
- Pain affects more Americans than diabetes, heart disease, and cancer **combined**¹
- More than 75 million people suffer from persistent pain²
- Pain has tremendous personal, relational, and social cost¹...
- Fiscal cost \$100 billion per year¹
 - Just under the amount needed to insure 45 million uninsured people in the U.S., ie, \$122.6 billion³
 - Equals the GDP of 65 lowest income countries combined⁴

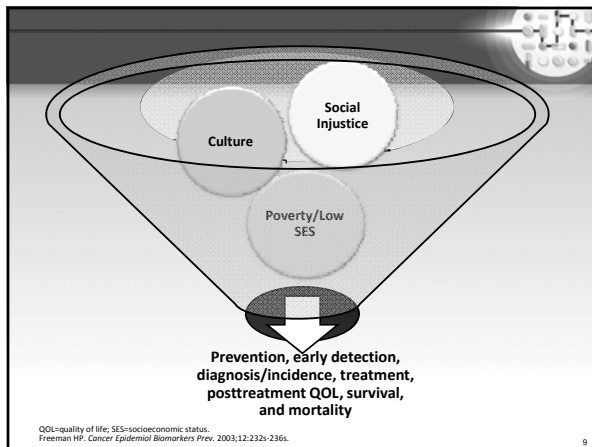
1. American Academy of Pain Medicine. <http://www.painmed.org/patient/facts.html>. Accessed August 13, 2010.
2. Abov YS. *SNRN News*. 2007;39:24-26.
3. Hadley J, et al. *Health Aff*. 2008;27(9):999-W415.
4. CIA World Factbook. www.cia.gov/library/publications/the-world-factbook/. Accessed Aug 13, 2010.

Health Care Disparities: A Framework for Analysis¹

- **Patient-Related Variables**
 - Biological, psychosocial, and cultural variables contribute to differences in endogenous pain modulation and response to pain and treatments^{1,2}
- **Health Care Provider-Related Variables**
 - Pain is often underestimated with minority populations³
 - Minorities are less likely to receive adequate analgesia⁴
- **Health Care System-Related Variables**
 - Access to general and specialty care is a problem for minorities⁵⁻⁷
 - Socioeconomic demographics contribute to disparities in access to opioid medications⁸

1. Anderson K, et al. J Pain. 2009;10:1187-1204.
2. Campbell CM, et al. J Pain. 2008;9:759-766.
3. Cleveland CC, et al. Ann Intern Med. 1997;127:813-816.
4. Chen L, et al. J Gen Intern Med. 2005;20:593-598.
5. Freeman HP. CA Cancer J Clin. 2004;54:72-77.
6. Green CR. J Pain. 2008;9:1071-1073.
7. Ficoella K, et al. JAMA. 2002;288:2853.
8. Green CR, et al. J Pain. 2005;6:689-699.





Access to Opioids

- The most consistently observed racial/ethnic disparity in pain management is in the prescription of opioid analgesics
- In one study of the emergency department, white patients were
 - 86% more likely to receive opioids
 - 82% more likely to be discharged with a prescription for pain medication
 - 98% more likely to receive discharge prescriptions for opioids than African Americans
- This may be improving in African American patients, but no improvement has been seen in Hispanic populations

Heins A, et al. / Opioid Manag. 2006;2:335-340.

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Bringing It All Together...

- Race, ethnicity, and disparity are murky concepts
- "Whatever this race construct represents" matters in pain treatment outcomes
- Culture is not a monolith; cultures and subcultures are social constructions
- "On-Average" care may be appropriate for policy development but may not be sufficient for patient-centered clinical care
- Cultural competence sometimes is really about accepting and recognizing our "lack of competence" in navigating through the plethora of cultures and subcultures
- "Simply" make patients in-charge... and *learn about them from them*
- What would "a" patient want...just ask "the" patient!

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Evidence-Based Guidelines and Resources for the Management of Pain

Clinical Guidelines for the Use of Opioids in Chronic Noncancer Pain
American Pain Society 2009

Diagnosis and Treatment of Low Back Pain
A Joint Clinical Practice Guideline from the American College of Physicians and the American Pain Society
Annals of Internal Medicine. 2007;147:478-491.

Guideline for the Management of Cancer Pain in Adults and Children
American Pain Society 2005

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Evidence-Based Guidelines and Resources for the Management of Pain (cont'd)

Guideline for the Management of Fibromyalgia Syndrome Pain in Adults and Children
American Pain Society 2005

The Management of Persistent Pain in Older Persons
Journal of the American Geriatrics Society. 2002;50:s205-s224.

Guideline for the Management of Pain in OA, RA, and JCA
American Pain Society 2002

Guideline for the Management of Acute and Chronic Pain in Sickle-Cell Disease
American Pain Society 1999

Future Goals: Professional, Educational, and Research

- Increasing the diversity of providers, program administrators
- Educating professionals about diversity and pain management
- More participation by diverse race groups in research (intervention studies)
- Understanding aging and diversity, and increased research and education on minority aging

Future Goals: Professional, Educational, and Research (cont'd)

- Research on how gender, economic factors, language, acculturation, and family and health support influence health, QOL, and quality of care in racial and ethnic minorities experiencing pain
- Pain assessment measures that are culturally and linguistically (*age*) sensitive
- Research directed to understanding clinical decision making, stereotyping, bias, variability
- Multidisciplinary approaches: integrating basic, clinical, and health service research methodologies

From Research to Practice: Your Role in Reducing or Eliminating Pain Treatment Disparities

- Conduct thorough evaluations of health care systems and practice sites to identify vulnerable patient populations most affected by inequitable pain treatment and opportunities to reduce or eliminate disparities through sensitivity training, implementation of practice guidelines, and patient advocacy programs
- Establish mechanisms and procedures to ensure that patients with chronic pain have immediate access to prescribed opioid analgesics
 - Form effective working relationships with community-based pharmacists to recognize the analgesic needs of patients served
 - Assist socioeconomically disadvantaged patients take advantage of pharma-sponsored indigent or patient assistance programs to procure analgesics

Meghani SH, et al. Pain Med. In preparation. 22

From Research to Practice: Your Role in Reducing or Eliminating Pain Treatment Disparities (cont'd)

- Seize opportunities to partner with pain advocacy groups/organizations and professional organizations and agencies to promote awareness of pain treatment disparities through education, media communication, and service on advisory boards and special interest groups
- Raise awareness about the problem of pain treatment disparities among government officials, legislators, policy makers, and influential health care community leaders
 - Act as spokespersons at open hearings on health care
 - Participate in state pain initiatives/coalitions
 - Disseminate information to medical, nursing, and other health professional state boards to model state programs, and facilitate the adoption of statutes or guidelines advancing the cause of reducing/eliminating pain disparities

Meghani SH, et al. Pain Med. In preparation. 23
