

## **FACT SHEET: Chronic Pain**

Chronic pain is pain that persists beyond the expected period of healing after an illness or injury, or a persistent pain that disrupts sleep and normal living. Some types of chronic pain are low back pain, osteoarthritis pain, cancer-related pain and neuropathic pain.

### **Causes**

- Injury from trauma or surgery or pain resulting from chronic conditions, such as arthritis, cancer or diabetes.
- Compression of nerves or damage to the central nervous system.
- Sometimes, the cause of chronic pain may not be known.

### **Prevalence**

- More than 50 million people living in the United States suffer from chronic pain.
- Two-thirds of pain sufferers have been living with their pain for more than five years and experience pain almost six days a week.

### **The Impact of Chronic Pain on the Individual**

- Inadequately managed pain can produce anxiety, fear, depression, or cognitive dysfunction.
- Chronic pain can increase disabilities of other disorders including depression and anxiety, and is a risk factor for suicide in depressed patients.
- Chronic pain interferes with sleep and adversely affects the quality of life of people dealing with pain – both in terms of their day-to-day activities and their emotional well-being.
- In 2006, nearly nine in 10 employees living with chronic pain (89%) reported that they typically go to work rather than stay at home when experiencing pain.
- Nearly half of employees living with chronic pain (46%) said their pain affected their ability to perform their job.

### **The Impact of Chronic Pain on the Employer**

- In 2006, the cost of lost wages translated into \$1.1 billion, due to employees with chronic pain calling in sick because of any pain-related condition.

## **Inadequate Treatment of Chronic Pain**

- One in four chronic pain sufferers have made at least three changes in doctors, the primary reason being lack of effective treatment.
- Reasons for inadequate pain treatment include underassessment, a disparity between the clinician's and patient's assessment of pain severity, and cultural, legal and healthcare system barriers.
- Barriers to pain treatment result in failure to assess pain, to accept the patient's self-report and/or failure to take appropriate action to treat pain.
- The need for further research into pain mechanisms and control was recognized by the U.S. Congress in its declaration of the years 2001-2010 as the Decade of Pain Control and Research.

## **Chronic Pain Management Options**

Pharmacologic approaches are the mainstay of pain treatment. Some approaches to chronic pain treatment may incorporate non-pharmacologic interventions with pharmacologic treatment.

- **Pharmacologic Treatments:**
  - Non-opioid analgesics, e.g., non-steroidal anti-inflammatory drugs, (NSAIDS) including ibuprofen, naproxen and aspirin; selective COX-2 inhibitors; acetaminophen
  - Opioids
  - Mixed mu agonist opioid and norepinephrine serotonin reuptake inhibitors
  - Adjuvant analgesics, e.g., some antiepileptic and antidepressant medications
  - Topical analgesics, etc.
- **Nonpharmacologic Approaches:**
  - Psychological, e.g., relaxation therapy, psychological counseling, biofeedback
  - Physical rehabilitation, e.g., exercise, stretching, acupuncture, massage
- **Surgery**

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