Impact of Science on Real Life Experiences
ACPA Mission Statement

Since 1980 our mission has remained the same.

- To facilitate peer support and education for individuals with chronic pain and their families so that these individuals may live more fully in spite of their pain.
- To raise awareness among the health care community, policy makers, and the public at large about issues of living with chronic pain.
The journey of how to treat pain over the past 40 years

- **1978**: No opioids, Integrative Approach
- **Late 80’s**: Interventions
- **Late 90’s**: Opioids
- **2021**: Integrative Approach
• March 18, 2016, released Guidelines for Primary Care
• This guideline is intended for primary care clinicians
• Who read the complete Guidelines?
• Media reported on the recommendations
• Providers feared prescribing
• Many suffered
Survey of 1000 with pain after CDC Guidelines

Barriers with HCP

- 56% had difficulty obtaining a prescription for their pain medications
- 39% physician no longer prescribes pain medication
- 63% pharmacy carries only a limited supply of medication
- 28% said the pharmacy does not carry their medication

- 47% of respondents have contemplated suicide because they cannot find relief from their pain.
Impact on People with Pain

Survey of 1000 with pain after CDC Guidelines

Barriers at Pharmacy

7% were asked to produce complete medical records
15% were simply refused a refill with no reason given
18% pharmacist was concerned over the prescription
So, what do people do when they cannot get the medications, they want and need to live a more normal life.

• Some simply suffer.

• Some hoard medication, taking less than the prescribed amount so they will not run out.

• Many go to the emergency room seeking relief.

• Others self-medicate with alcohol and marijuana.

• And some are desperate enough to turn to street drugs.
I started using illegal opiates after I was not able to get medication.

I will have no choice but to commit suicide when I am no longer able to travel out of state every three months to get a prescription.

I have fraudulently called in prescriptions and bought them off the street. The amount of guilt I feel is extraordinary. I have now ruined my life.

I take meds to make me sleep as much as possible. I lie on the couch and watch TV and cry. I vomit a lot. When I can't handle it anymore, I tell my wife to take me to the ER.

I suffer in immense pain. This tears my family apart.

I stay in bed in agony, weeping, depressed, can't work, eat, sleep function. No quality of life. I feel lost, scared, and alone. Pain takes over my whole body and all aspects of my life.
How did we get to this point?

- Expectation of person with pain and health care professionals
- Payers don’t reimburse for many treatments and therapies
- PWP were tapered too fast or simply cut off without any other pain management interventions
- Learn to live with it!
Don’t tell me Teach me!
How did we get to this point?

- Lack of education for HCP
- HCP are not paid for time to do a complete assessment
What is being done?

PCORI has funded grants to help reduce opioid prescribing

• Many focused tapering or stopping opioids
• Some include CBT, PT or shared decision making
• A few looked at a combination of therapies
• The problem is that none have combined a number of therapies and treatments to help a person manage their pain long term
What is needed

• They still have pain
• Need more than tapers
• Need to know how to manage pain
What is needed

A balanced approach
American Chronic Pain Association

www.theacpa.org
Thank You
Q & A