Chronic Pain Study

A new study in the journal *Pain* reported that people with chronic pain may be able to use online tools to manage their symptoms, reducing the need for frequent physician office visits. Chronic pain costs the US economy an estimated $600 billion a year. The most common treatments - narcotics and surgery - have disadvantages, including risk of addiction and complications from surgery. Also, available treatments do not help all people find relief from chronic pain.

Individuals in the study participated in a series of web-based pain management tutorials with different levels of contact with clinicians. Researchers divided 490 adults who had experienced pain for at least six months into one of three treatment groups to receive the web-based tutorials.

1. One group had regular contact with clinicians during the study. Regular contact was defined as weekly phone or email conversations with clinicians trained in psychology, along with using the web-based tools.

2. People in the optional contact group used the web-based tools and were told that the regular clinician contact option was available if they wanted it.

3. The non-contact group used the web-based tools and was told clinicians were only available if they had technical difficulties or a mental health emergency.

A fourth control group carried on usual treatment with their clinicians. The regular contact group (group 1) had an average of 68 minutes of contact with clinicians over the eight-week treatment period compared with 13 minutes for the optional contact group (group 2) and about five minutes for the group with only emergency contact (group 3).

All participants in the treatment groups, regardless of how much contact they had with clinicians, reported significant reductions in disability (18 percent), anxiety (32 percent), depression (36 percent) and average pain levels (12 percent) at the end of the eight week study. These effects remained at the three month follow up. Individuals in the treatment groups had significantly greater reductions in disability, depression and anxiety than the patients in the control group.

The lead researchers acknowledged that while in-person pain management programs are important, many adults with chronic pain can benefit from web-based programs and many do not need a lot of contact with the clinicians to benefit. One limitation the researchers acknowledged was that all participants in the treatment program were seeking a pain management program, and they do not know if these results would differ among people not looking for this type of care.
Studies have shown that about 100 million Americans have chronic pain, and that persistent pain (defined as frequent or constant pain lasting longer than three months) is correlated with other indices of health-related quality of life, such as anxiety, depression and fatigue. From a public health perspective, persistent pain may be an indicator of unmet need for pain management in the general population, as well as a risk factor for disability, depression and dependency. Individuals with chronic pain are also at increased risk for long-term exposure to and dependency on pain medications. New approaches such as web-based programs could offer a viable therapeutic option for some individuals.


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