Health policy “needs to prioritise chronic pain”

‘Societal Impact of Pain’ Symposium 2016 discusses the socioeconomic impact of pain and policy solutions

Around 20 percent of Europe’s adult population suffer from chronic pain. The resulting direct and indirect costs amount to 1.5 to 3 percent of Europe’s total GDP, EFIC’s Symposium in Brussels on the Societal Impact of Pain was told today. The meeting brought together experts, patients’ representatives, and policymakers to discuss the socioeconomic implications of pain and policy solutions, and called for prioritizing pain as a disease in its own right in the EU Health Programme.

Brussels, May 24, 2016 – Approximately 20 percent of Europe’s adult population, more than 80 million people, suffer from chronic pain, meaning pain which occurs repeatedly over a period of three months or longer. This is more than twice the number of patients with diabetes. Some 9 percent of Europeans experience pain very day. The total direct and indirect costs of chronic pain amount to an estimated 1.5 to 3 percent of total European GDP. It is against this alarming background that the European Pain Federation EFIC and its partners discussed the socioeconomic implications of pain and policy solutions to this burden for individual and societies at the 6th European Symposium “Societal Impact of Pain (SIP 2016): Time for Action” in Brussels. The meeting brought together over 200 pain experts, patients’ representatives, and policymakers representing 28 European countries.

“It is of utmost importance to increase the visibility of chronic pain as a medical, economic, and social problem, since it affects quality of life more than most other illnesses,” says EFIC President Dr Chris Wells. “Chronic pain affects the quality of life more than many other conditions, and it is the number one reason why people see their doctors. We need to address the huge burden the treatment of chronic pain places on health budgets, but above all the indirect costs arising from lost productivity and incapacity for work.” Chronic pain accounts for 500 million sick days a year and is the most frequent cause of early retirement and incapacity for work.

“The SIP 2016 symposium engaged all stakeholder groups involved in future policy making impacting the societal impact of pain”, says Prof Bart Morlion, EFIC’s EU Liaison Officer and President Elect. “With this symposium, we can contribute to this end by providing an opportunity for an exchange of information and best practices and by stimulating task-oriented discussion, which is of particular importance in view of the under treatment problem we are facing in the field of pain care in Europe.”

More than half of chronic pain patients suffer from the condition for two years and more before they receive adequate treatment, as the “Pain Proposal” study showed some years ago. A third of patients get no treatment at all.

SIP 2016: Broad range of topics
Topics discussed at the SIP 2016 symposium include pain, rehabilitation, and the reintegration of pain sufferers in the workforce; pain as a disease in its own right; the relevance of pain in cancer care, and pain as a quality indicator for health care. “Since pain is a central experience of patients make in many healthcare settings, the quality of pain care can be considered an indicator of the general quality of the healthcare system”, EFIC President Wells points out.

The quality theme is of particular interest in the context of the Cross-border Healthcare Directive ratified in 2011. This piece of EU legislation has defined, inter alia, under which conditions European citizens can claim the right to seek treatment in another EU Member State and be refunded by his or her own country's national health service or other relevant bodies. Severe pain is among the criteria that can trigger authorization of cross-border healthcare. However, a SIP survey has shown that most EU Member States are not implementing this provision on their national regulations. “Unfortunately, we do not see much progress on this particular aspect of the Directive”, says Prof Morlion. “This is all the more regrettable as we do have very reliable pain assessment tools available which would permit exactly this kind of judgement.”

“Pain should be prioritized in the EU Health Programme” – Strengthen prevention and optimise pain training

“The prevalence of chronic pain, its societal and economic impact, and the clear deficiencies in pain care should be a wake-up call to policy makers” says Prof Morlion. In autumn 2016, the European Commission is due to conduct the mid-term review of the current Health Programme 2014-2020, and to launch consultation on this topic. “This would be a good opportunity to indicate to the Commission that chronic pain needs to be prioritized in the future”, says the EFIC President Elect. “We also need a much stronger focus on primary and secondary prevention. Right now, we are spending 97 percent of the considerable healthcare budgets in Europe on curative medicine, and only a meagre three percent for prevention. This is all the more worrying since it is most obvious how much chronic pain could be avoided by primary prevention efforts, in particular with respect to musculoskeletal pain, and by structured secondary prevention for persons at risk for pain chronification.”

EFIC President Chris Wells concurred that “one of EFIC’s main goals is to improve pain management in Europe at all levels. This includes, to a large extent, harmonising and optimising training and education in pain medicine around the continent. We have therefore developed a European Curriculum and Multidisciplinary Diploma which will be recognised across Europe. The first exams will take place in 2017.”

The scientific framework of the “Societal Impact of Pain” (SIP) platform is under the responsibility of the European Pain Federation EFIC. Cooperation partners for SIP 2016 are Pain Alliance Europe (PAE) and Active Citizenship Network (ACN). The pharmaceutical company Grünenthal GmbH is responsible for funding and non-financial support (e.g. logistical support). The scientific aims of the SIP symposia have been endorsed by a large number of international and national pain advocacy groups, scientific organisations, and authorities.
For further details see: https://www.sip-platform.eu/

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